



COMMERCIAL SIGN PERMIT APPLICATION

APPLICANT/SIGN COMPANY INFORMATION	PROPERTY OWNER INFORMATION
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Applicant:	Owner Name:
Address:	Owner Address:
Phone:	Owner Phone/Cell:
Email:	Email:

PROPERTY INFORMATION		
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Property Address:	Zoning District:	Total # of Current Signs of Property:
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SIGN SPECIFICATIONS		
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<input type="checkbox"/> Wall Sign <input type="checkbox"/> Free Standing <input type="checkbox"/> Window Sign		
Sign Height:	Sign Width:	Total Sq. Ft. of Sign:
Height of Sign Above Ground:	Height of Sign Support:	Distance of Setback:
Material:	Graphics:	

I hereby certify that all information in this application is correct and all work will comply with Foxfire Village Ordinances.

_____ Applicant Signature	_____ Date
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A FULLY DIMENSIONED SKETCH OF ALL PROPOSED SIGNS MUST ACCOMPANY THIS APPLICATION.

<input type="checkbox"/> Cash <input type="checkbox"/> Check _____	SIGN PERMIT FEE \$25.00
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_____ Village Approval	_____ Date
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Approved Permit Applications are in force for one (1) year from date of application.

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