

# TOWN OF DELMAR

Code Enforcement Officer

100 S. Pennsylvania Ave.

Delmar, MD 21875

Ph: 410-896-2777/302-846-2664 Fax: 410-896-9055

[www.townofdelmar.us](http://www.townofdelmar.us)

Building Permit #: \_\_\_\_\_

Tax ID #: \_\_\_\_\_

Appl. ID #: \_\_\_\_\_

## SIGN PERMIT APPLICATION

### PROJECT INFORMATION

Application Date: \_\_\_\_\_ Est. Cost of Construction: \$ \_\_\_\_\_

Project Address: \_\_\_\_\_

Type of Sign: ☐ Wall ☐ Ground ☐ Pole/Pylon ☐ Directional ☐ Other: \_\_\_\_\_

Brief description of sign & what it's advertising: \_\_\_\_\_

# of Faces: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_ Total Sq. Ft.: \_\_\_\_\_

Height Above Grade: \_\_\_\_\_ Setback From Curb: \_\_\_\_\_

Type of Illumination: ☐ Internal ☐ External ☐ N/A Sign Material: \_\_\_\_\_

Time Limit of Sign: ☐ Permanent Sign

### PROPERTY OWNER INFORMATION

Name of Property Owner(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### SIGN CONTRACTOR INFORMATION

Contractor's Name: \_\_\_\_\_ License #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Business Phone: ( ) -

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

*A drawing/sketch or photograph of the sign(s) must be submitted with permit application A separate application must be submitted for EACH sign*

Applicant's Name: \_\_\_\_\_ Phone: ( ) -

Applicant's Email: \_\_\_\_\_ Date: \_\_\_\_\_

### Office Use Only

Required Approvals Date/Initials

☐ Planning & Zoning \_\_\_\_\_

Permit Fee: \$ \_\_\_\_\_ Ck # \_\_\_\_\_

Approved By: \_\_\_\_\_

*Planning and Zoning Director*