

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

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

Permit Fee: \$ _____ Ck # _____

Approved By: _____
Planning and Zoning Director

Required Approvals Date/Initials

Planning & Zoning _____