

CITY OF GUNNISON
APPLICATION FOR SIGN PERMIT
 rev 8/13/04

Sign Permit # _____
 Date Approved _____

APPLICANT INFORMATION:

Business Name _____ Owner Name _____
 Business Address _____ Mailing Address _____
 Telephone No. _____ Zoning _____ Lot, Block, Addition _____

SIGN INFORMATION: Please include all existing and proposed signs.
 Replacement signs must be exact dimensions of old sign.
SKETCH AND SITE PLAN MUST BE ATTACHED FOR APPROVAL

	*EPR	Type of Sign	Area (SqFt)	Projection	Height	Wattage	Setbacks
Sign 1							
Sign 2							
Sign 3							
Sign 4							
Sign 5							

*E=Existing; P=Proposed; R=Replacement If more signs are requested, please use reverse side

TOTAL SQUARE FOOTAGE REQUESTED _____ sq. ft.

OWNER ACKNOWLEDGMENT

I, _____, hereby acknowledge that I have read this application and state that the above information is correct, and I hereby agree to construct, alter or repair the proposed sign(s) in strict accordance with the City of Gunnison Land Development Code, Chapter 15-10.

Applicant Signature _____ Date _____

OFFICE USE ONLY

Total Sq. Ft Allowed by Code: _____ Zone _____
 #Signs Approved: _____ Total Sq Ft Approved: _____ Date Approved _____ By: _____
 If Denied, Reason: _____
 License Agreement: Y/N Date Approved by Council _____ (Please Attach Lic. Agmt)
 DB Entry Initials _____

INSPECTION REPORT

Anticipated Date of Completion _____ Inspection Scheduled for _____
 Actual Date of Inspection _____ Inspector _____
 Comments/Result of Inspection: _____

DB Entry Initials _____

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	*EPR	Type of Sign	Area (SqFt)	Projection	Height	Wattage	Setbacks
Sign 6							
Sign 7							
Sign 8							
Sign 9							
Sign10							
Sign11							
Sign12							

*E=Existing; P=Proposed; R = Replacement _____TOTAL SqFt

ADDITIONAL COMMENTS BY APPLICANT:

ADDITIONAL COMMENTS BY BUILDING INSPECTOR:

PLEASE ATTACH SITE & SKETCH MAP SHOWING PROPERTY LINES, STREETS, CURBS, SIDEWALKS AND SETBACKS