

P.O. Box 128 304 8th Street Gilcrest, Colorado 80623 Office (970) 737-2426 ●Fax (970) 737-2427

SIGN PERMIT APPLICATION

Name	of Business				
Addre	ess – Location of sign(s)_				
Legal	Description				
_	erty Owner				
Phone	2	Fax	Email		
_	Erector Company		Title		
\$\circ\$ \circ\$ \	 Names and addresses of the owner, sign contractor and erectors; Legible site plans which include the specific location of the sign and setbacks to adjacent property lines and buildings; A detailed drawing indicating the dimensions, materials and colors of the proposed sign structure. A certification by a structural engineer may be required by staff for a freestanding or projecting sign; A graphic drawing or photograph of the sign copy; A description of the lighting to be used, if applicable; Proof of public liability insurance covering freestanding signs and projecting wall signs; If the sign is to be located off the premises advertised, a written lease or permission from the property owner of the site on which the sign will be located; and 				
Reviev		Dru			
rown	of Gilcrest Action:	By:	Date:		



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Project Name:	
Date Submitted:	Application Fee:
SIGN INFORMATION	
Business Name:	Existing Zoning:
Address of Sign:	
Total Square Footage (for 2-sided signs, double foot	age):
Type of Lighting (Illuminated, Internal, External):	
Type of Sign:	Number of Signs:
Sign Dimensions:	Height of Sign:
APPLICANT INFORMATION	
Property Owner:	Phone #
Address:	
Applicant:	Phone #
Address:	
CERTIFICAITON	
I certify that I am the lawful owner of the parcel(s) α to this action.	of land which this application concerns and consent
Property Owner:	Date
I certify that the information and exhibits I have sub knowledge. In filing this application I am acting with I understand that all materials and fees required by having this application processed.	n the knowledge and consent of the property owners.
Applicant:	Date