



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

SIGN PERMIT APPLICATION

Name of Business _____
Address – Location of sign(s) _____
Legal Description _____

Property Owner

Contact _____
Phone _____ Fax _____ Email _____

Sign/Erector Company

Contact _____ Title _____
Phone _____ Fax _____ Email _____

Please submit the following.

- The location by street number and the legal description of the proposed sign structure;
- 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
- Sign permit fee and plan check fee as established by the current fee schedule. The applicant shall pay all costs billed by the Town relative to the review of the application.

Application fee: *(check payable to the Town of Gilcrest)*

_____ Sign Permit Fee: \$150.00

_____ Plan Check Fee: \$ _____

_____ Building Permit Application

_____ Signed Reimbursement Agreement:

A building permit may be required from the Town of Gilcrest prior to installation of any sign. Please contact Town Clerk at gail@townofgilcrest.org or (970) 737-2426.

For Official Use Only

Review & Comments: _____

Town of Gilcrest Action: _____ By: _____ Date: _____



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

SIGN PERMIT APPLICATION

Project Name: _____

Date Submitted: _____ Application Fee: _____

SIGN INFORMATION

Business Name: _____ Existing Zoning: _____

Address of Sign: _____

Total Square Footage (for 2-sided signs, double footage): _____

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: _____

CERTIFICATION

I certify that I am the lawful owner of the parcel(s) of land which this application concerns and consent to this action.

Property Owner: _____ Date _____

I certify that the information and exhibits I have submitted are true and correct to the best of my knowledge. In filing this application I am acting with the knowledge and consent of the property owners. I understand that all materials and fees required by the Town of Gilcrest must be submitted prior to having this application processed.

Applicant: _____ Date _____