

Sign Permit Application

CITY OF FAIRFAX

525 Vanderbilt St., PO Box 337, Fairfax, IA 52229 * 319-846-2204 * 319-846-3480 (Fax)

Permit Number:		Date:	
Site Address:		City:	State: ZIP:
Owner's Name:		Owner's Phone Number:	
Owner's Address:		City:	State: ZIP:
Applicant's Name (if different than owner):		Applicant's Phone Number:	
Applicant's Company Name (if applicable):			
Applicant's Address:		City:	State: ZIP:
Signs			
Sign 1 SIZE OF SIGN _____ft. X _____ft. AREA: = _____ft.	Sign 2 SIZE OF SIGN _____ft. X _____ft. AREA: = _____ft.	Sign 3 SIZE OF SIGN _____ft. X _____ft. AREA: = _____ft.	Sign 4 SIZE OF SIGN _____ft. X _____ft. AREA: = _____ft.
Total Number of Sign Surfaces:		Total Area (sq. ft.):	
Sign Type: ____ Wall ____ Ground ____ Projecting		Height of Sign (ft. above grade):	
Setback From Property Lines:		Front (ft.)	Side (ft.) Rear (ft.)
<p>CERTIFICATION: Separate permits are required for Electrical, Building, Plumbing, Heating, Ventilating, Air Conditioning, Utility and Fences. All provisions of laws and Ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other Federal, State or Local law regulating construction or the performance of construction activities. This permit may be revoked at any time for due cause.</p>			
I hereby certify that I have read and examined this application and know the same to be true and correct.			
Applicant's signature:			Date: