



CITY OF PEABODY, MASSACHUSETTS
Application for Sign Permit

This section for official
use only
Permit Fee: _____

For office use: Permit number: _____ Estimated Cost: _____

Date of issue: _____ Map _____ Lot _____

Inspector's signature: _____

File one (1) copy of the completed application form and one (1) copy of all attachments as indicated below with the Building Inspector's Office. Upon approval by the Building Inspector and/or the Zoning Board of Appeals the applicant must receive a sign permit from the Building Inspector before the erecting of any sign.

Please note: Incomplete applications will not be accepted. Review the sign ordinance prior to filling out this application.

To the Building Inspector

A. Business Name _____

B. Name and Address of Applicant _____

Telephone Number (Home) _____ (Business) _____

C. Name and Address of Property Owner _____

D. Name and Address of Sign Maker _____

Telephone Number _____

ANSWER THE FOLLOWING QUESTIONS IN FULL:

1. Address where sign will be located _____

2. Zoning District _____

3. Distance of Building from Public Way _____

4. Name of Road(s) Sign(s) intended to face _____

5. Type of Sign(s) being applied for:

Wall Sign (primary)___ Wall Sign (Secondary)_____ Freestanding Sign _____

Hanging Sign _____

Window Sign(s)_____ Awning Sign _____ Gasoline Price Sign ___

6. Sign Size
Wall Sign 1: height _____ length _____ depth _____
Wall Sign 2: height _____ length _____ depth _____
Freestanding Sign: height _____ length _____ depth _____
Window Sign: height _____ length _____ Window size (ft²) _____

Awning Sign: height _____ length _____ depth _____
 Gasoline Price Sign: height _____ length _____ depth _____
 Hanging Sign: height _____ length _____ depth _____ Sidewalk width _____
 projection _____

7. Wall Area (required for wall sign applications): height _____ length _____ wall area _____

8. Height of Letters: Wall Sign 1: height _____
 Wall Sign 2: height _____
 Freestanding Sign: height _____
 Window Sign: height _____
 Awning Sign: height _____
 Hanging Sign: height _____

9. Height of Sign: Wall Sign 1: highest point: _____ lowest point _____
 (from ground level) Wall Sign 2: highest point: _____ lowest point _____
 Freestanding Sign: highest point: _____ lowest point _____
 Awning Sign: highest point: _____ lowest point _____
 Hanging Sign: highest point: _____ lowest point _____

10. Sign Material: _____

11. Text of Sign: _____

12. Illumination (if any): _____
 Listing Number: _____ Testing Lab: _____

Illuminated signs shall be wired by a licensed electrician. Sign must be listed by a testing lab (UL or ETC or the like).

13. Color Information: Wall Sign 1: letters _____ background _____ additional: _____
 Wall Sign 2: letters _____ background _____ additional: _____
 Freestanding Sign: letters _____ background _____ additional: _____
 Window Sign: letters _____ background _____ additional: _____
 Awning Sign: letters _____ background _____ additional: _____
 Hanging Sign: letters _____ background _____ additional: _____

14. Number of establishments in building or complex: _____

ATTACH THE FOLLOWING WITH THIS APPLICATION. APPLICATION WILL NOT BE ACCEPTED WITHOUT THESE ATTACHMENTS.

All applications:

- _____ **Sketch of Sign:** Indicate dimensions, all colors, lettering type, and materials.
- _____ **Building Elevation:** Clearly indicate location of sign in relation to building
- _____ **Cross Section:** Indicate how sign will be mounted, including necessary hardware
- _____ **Site Plan:** For Freestanding Signs only, indicate distance of sign from public way and from building
- _____ **Photographs:** Show existing building and areas where signs are proposed to be located.

ESTIMATED COST _____

I CERTIFY, UNDER THE PAINS AND PENALTIES OF PERJURY, THAT THE INFORMATION SET FORTH IN THIS APPLICATION IS TRUE AND COMPLETE.

 (Signature of Sign Owner or Representative)

 (Date)