

<p>City of Shawnee</p> 	<h1><u>SIGN PERMIT</u> <u>APPLICATION</u></h1>	<p><b>Planning Office</b>  <b>405-878-1666</b>  222 N Broadway Ave  Shawnee OK 74801-6917  www.ShawneeOK.org  FAX: (405) 878-1587</p>
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DATE RECEIVED \_\_\_\_\_ PERMIT NO. \_\_\_\_\_ INSPECTOR \_\_\_\_\_

**BUSINESS NAME:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_ CITY LICENSE NUMBER: \_\_\_\_\_

**LOCATION OF SIGN (ADDRESS):** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

LEGAL DESCRIPTION OF SITE: \_\_\_\_\_

**TYPE OF SIGN:** \_\_\_\_\_ **# OF SIGNS:** \_\_\_\_\_

DIMENSION OF SIGN AREA: \_\_\_\_\_ DIMENSIONS OF EXISTING SIGNS: \_\_\_\_\_

HEIGHT OF SIGN: \_\_\_\_\_ ESTIMATED COST OF SIGN & INSTALLATION: \$ \_\_\_\_\_

**OWNER/BUSINESS NAME:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

**\*ELECTRICAL CONTRACTOR** \_\_\_\_\_ **CITY LICENSE NO.** \_\_\_\_\_

*(ALL FIELD WIRING TO SIGN MUST BE PERFORMED BY LICENSED ELECTRICIAN)*

**REQUIREMENTS (MUST PROVIDE FOR APPROVAL OF APPLICATION):**

Provide site plan and elevation drawings of the proposed sign and caption to the sign. Also, provide structural details of the work to be done, including details of all connections, guy lines, supports and footings and materials to be used. Furnish wind stress calculations for symmetrically loaded signs.

Every sign for which a permit has been issued shall be plainly marked with the name of the person, firm or corporation owning, erecting, maintaining or operating such sign. The method and location of this identification shall appear on the plans submitted. This application shall be accompanied by written consent of the owner or lesser of the premises upon which the sign is to be erected.

**I CERTIFY I WILL CONFORM TO THE CITY OF SHAWNEE ORDINANCES, REGULATIONS AND REQUIREMENTS FOR THIS WORK. I ALSO UNDERSTAND THAT THIS PERMIT MAY BE REVOKED FOR FAILURE TO COMPLY.**

*(ALL SIGN PERMITS REQUIRE A FOOTING & FINAL INSPECTION.)*

**CONTRACTOR SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**CITY INSPECTOR** \_\_\_\_\_  **CITY APPROVAL**  **DENIAL DATE** \_\_\_\_\_

**COMMENTS:** \_\_\_\_\_

**NUMBER OF SIGNS** \_\_\_\_\_  
**APPLICATION FEE \$25.00 PER SIGN**  
**TOTAL FEE** \_\_\_\_\_

**ISSUE DATE** \_\_\_\_\_  
**CASH/CREDIT CARD/CHECK#** \_\_\_\_\_  
**ISSUED BY** \_\_\_\_\_