

HEARING DATE \_\_\_\_\_

CASE # \_\_\_\_\_

### SIGN PERMIT APPLICATION

**TOWN OF PIKE ROAD**  
9575 Vaughn Road, Pike Road, AL 36064  
(334) 272-9883/FAX (334) 272-9884

APPLICANT NAME \_\_\_\_\_

SITE ADDRESS \_\_\_\_\_

APPLICANT ADDRESS \_\_\_\_\_

PROJECT NAME \_\_\_\_\_

DAYTIME TELEPHONE \_\_\_\_\_

FAX NUMBER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

**THIS APPLICATION IS FOR:**

- New Sign
- Painting, Repair or Replacement of Existing Sign(s)

**THE FOLLOWING SIGN TYPES ARE INCLUDED IN THIS PERMIT REQUEST:**

- Freestanding Sign(s):

*Dimensions Of Sign Face* \_\_\_\_\_ *Area (s.f.)* \_\_\_\_\_ *Height of Sign* \_\_\_\_\_

- Wall Sign(s) (includes signage for accessory structures):

Sign #	Length of Display façade	Dimensions	Area (s.f.)
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

**Total Display Area:** \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
**DRAWINGS OF ALL PROPOSED SIGNS MUST BE ATTACHED TO THIS APPLICATION. FOR ANY FREESTANDING SIGN, A DIAGRAM MUST BE PROVIDED SHOWING THE LOCATION OF THE SIGN ON THE LOT. FOR WALL MOUNTED SIGNS PROVIDE DRAWING SHOWING SIGN ON WALL/ELEVATION.**

*I, the applicant, certify that all of the above facts are true and correct to the best of my knowledge. I understand that any incorrect information may void this permit*

APPLICANT NAME (please print):	DATE:
APPLICANT'S SIGNATURE:	

Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_