



SIGN PERMIT APPLICATION

Site Address _____ Space # _____ Parcel# _____

Zone _____ Lot Frontage (length) _____ Building Frontage (length) _____ Plan Sign Program (if known) _____

Mall/Shopping Center/Name _____ New Business Yes No New Location Yes No

Is building greater than 45 years old? Yes No Age of Building _____ Historic Yes No

Applicant / Contact Name _____

Address _____ City _____ State _____ Zip Code _____

Phone # _____ e-mail _____

Property Owner _____ Signature _____ e-mail _____

Address _____ City _____ State _____ Zip Code _____

Contractor _____ e-mail _____

Contractor Address _____ City _____ State _____ Zip Code _____

Chula Vista Business License# _____ State Contractor's License _____ Class _____ Expires _____

Three complete sets of fully dimensioned, drawn to scale plans which include all of the following:
 (Minimum Plan Submittal Requirements)

- Title Sheet
- Plot/Site Plan
- Elevations
- Construction / Attachment details
- * Title 24 (illuminated signs)

GREY AREAS FOR STAFF USE ONLY

Sign Information: New Sign Re-face Illuminated* Non-Illuminated

Please indicate sign type, color and materials on plans and complete the section below by the appropriate box.
 (use another sheet if necessary)

Sign Type	Channel	Cabinet	Single Side	Double Side	Height (Ft.)	Length (Ft.)	Depth (Ft.)	Total (Sq Ft.)	Illuminated		Sign Reads
									Yes	No	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	

Types of Signs: Awning, Canopy, Directional, Monument, Projecting, Subdivision, Window, Wall, Other

Permit #: _____ Staff: _____

Related Case(s): _____

GREY AREAS FOR STAFF USE ONLY

_____ Date

PERMIT #

ADDRESS