



APPLICATION - PLANNED SIGN PROGRAM

APPLICANT INFORMATION

Applicant Name: Phone:
Applicant Address:
Applicant Is: Owner Agent Contractor

IF APPLICANT IS NOT OWNER, OWNER OR PROPERTY MANAGER APPROVAL IS REQUIRED
NAME: OWNER MANAGER
SIGNATURE: DATE:

PROPERTY INFORMATION

Contractor Name: Phone:
Contractor Address: License #:
Commercial/Business Center Name:
Business/Center Location:
Assessor's Parcel Number(s): Property Size:
Zone: General Plan:
Redevelopment Area: SPA or Specific Plan:
Lot Frontage: Building Frontage: Facing Street: ft.
Facing Parking: ft.

SIGN INFORMATION

Please give a general description of the number and types of signs that are proposed for the overall center. A site plan and building elevations must be provided with details of this information as part of your application. See the Application Checklist for further requirements.

Three horizontal lines for sign information description.

STAFF USE:

FORM 328 (REV 2/04)

Case #: Project Planner:
Filing Date: By: Proj Acct #: Deposit Acct #: