City of Lake Worth Permit Department 3805 Adam Grubb Lake Worth, Texas 76135 817-237-1211 X 112

Fax 817-237-1333



SIGN PERMIT APPLICATION

| Date: | | | Permit #: | | | |
|--|---|---|---|---|---|--|
| Permit Address: | | | <u> </u> | | | |
| Current Legal Block Description: | x/Abstract: | Lot/Tract: | Addition/Survey: | | | |
| | | PROPERTY OWN | ER INFORMATION | | | |
| First Name: Middle: or | | | Last Name: | | | |
| Company Name: | | | | 1 | | |
| Address: | | | City: State: | | te: | Zip: |
| Phone: | Fax: | | Email: | • | Mobile: | |
| | | CONTRACTOR | INFORMATION | | | |
| First Name: | | Middle: | | Last Name: | | |
| Company Name: | | | | 1 | | |
| Address: | | City: | | te: | Zip: | |
| Phone: | Fax: | | Email: | | Mobile: | |
| | | PERMIT INF | ORMATION | | • | |
| Property Use: | Property Use: Residential Commercial Construction Value: | | | | | |
| I have the owner's consent to perform this work? VES NO | | | Briefly describe work to be done: | | | |
| What is building used for? | | | Will there be a change in the use of the property? YES NO If yes, please describe: | | | |
| PERMIT REQUIREMENTS | | | | | | |
| The following guidelines apply for this permit: 1) Applicant must provide two sets of drawings/prints to be reviewed 2) Work must be designed and performed in accordance with all Lake Worth Ordinances 3) Permit and plan review fee is based on square footage of sign(s). (reinspection fees may be assessed as necessary) | | | | | | |
| This permit, once issued, exis obtained within 180 days for an additional 180 days activity authorized by the permit ordinances governing this traineauthorized by the product of the permit of the pe | of issuance. The upon written doc ermit. Only one e read and exam ype of work will | e authority having jurisdic umentation by the permit extension will be allowed ined this application and be complied with whether | etion shall be permitted ee of a satisfactory reas I. I understand that all know the same to be expecified herein or not. | to grant an or son for failure learnits restruction. The granti | extension of the re to start or co equire a final in orrect. All proving of a permit of | e permit time period mplete the work or aspection. visions of laws and does not presume to |
| give authority to violate or cancel the provisions of any other state or local law regulating construction of the performance of construction. Applicant Signature: Date: | | | | | | |
| Applicant Signature: Printed Name: | | | Application Received By: | | | |

SIGN PERMIT SUBMITTAL REQUIREMENTS

| ITEM REQUIRED | | WHEN ITEM REQUIRED |
|---|---|--------------------------|
| | Site plan that illustrates (to scale): Location of the building, structures, or property to which the sign(s) are to be attached or erected. Position of the sign(s) in relation to right-of ways, easements, buildings, structures, existing and/or proposed | All types of signage. |
| | signs, etc. Building elevations, including height and length (building signage.) | |
| Sign drawings (to scale) that illustrate the height, length, width, and all other dimensions associated with the sign(s), including each sign's total square footage. Details on sign installation. | | All types of signage. |
| | Illumination details including electrical contractor company information. (Contractor must be registered with City.) | All illuminated signage. |

DETAILS OF PROPOSED SIGNAGE

Specific Sign Type(s) (Check all that apply)

| ☐ Monument Sign ☐ Pole Sign | ☐ Menu Board Sign ☐ Gasoline Pricing Sign | | | |
|---|--|--|--|--|
| ☐ Directional Sign ☐ Building Sign | ☐ Directory Sign ☐ Subdivision Entry Sign | | | |
| Other: please describe | | | | |
| | | | | |
| | | | | |
| Attached Building Signage – Front Elevation | Attached Building Signage – Rear Elevation | | | |
| Storefront/Tenant area width:feet | Storefront/Tenant area width:feet | | | |
| Storefront/Tenant are height:feet | Storefront/Tenant are height:feet | | | |
| Sign area:square feet | Sign area: square feet | | | |
| Sign width:feet | Sign width:feet | | | |
| Letter height:inches; Logo heightinches | Letter height:inches; Logo heightinches | | | |
| | | | | |
| Attached Building Signage –Side Elevation | Attached Building Signage – Side Elevation | | | |
| Storefront/Tenant area width:feet | Storefront/Tenant area width:feet | | | |
| Storefront/Tenant are height:feet | Storefront/Tenant are height:feet | | | |
| Sign area:square feet | Sign area:square feet | | | |
| Sign width:feet | Sign width:feet | | | |
| Letter height:inches; Logo heightinches | Letter height:inches; Logo heightinches | | | |
| | | | | |
| Monument Signage | Pole Signage | | | |
| Total overall height of sign:feet | Total overall height of sign:feet | | | |
| Height of base:feet | Ground Clearance:feet Sign Dimensions:ft xft | | | |
| Height of base:feet Sign Dimensions:ft xft | Sign Dimensions:ft xft | | | |
| Total sign area:ft xft | Total sign area:ft xft | | | |
| Setback from property line:feet | Setback from property line:feet | | | |
| | | | | |
| Total number of signs being permitted? | Total square footage of all signage being permitted? | | | |
| | | | | |

| OFFICE USE ONLY | | | | | | | | | |
|--|---------------------------------|---|--------------------|---------------------------------|-------------------|--|--|--|--|
| SUBMITTAL DATE INFORMATION | | | | | | | | | |
| 1 st submittal date: | 1 st submittal date: | | | 2 nd submittal date: | | | | | |
| 3 rd submittal date: | | | submittal date: | | | | | | |
| REQUIRED APPROVAL SIGNATURES | | | | | | | | | |
| Permit applicati | ion and r | plans have been re | reviewed and are r | released f | for construction. | | | | |
| DEPARTMENT | | SIGNATURE | | APPROVAL DATE | | | | | |
| BUILDING DEPARTMENT | | | | | | | | | |
| | | PAYMENT IN | NFORMATION | | | | | | |
| Permit Fee: Plan Review Fee: | | Date Paid: | | Receipt #: | | | | | |
| Property Zoning: | | | Taxes Paid: | | Liens Paid: | | | | |
| Property Platted: YES NO | Site Plan | n Submitted: Permit Expiration I YES NO | | | Completion Date: | | | | |
| VARIANCE INFORMATION (Only to be completed if variance required) | | | | | | | | | |
| Variance Case #: | | Meeting Date: | | | Approved Denied | | | | |
| Comments/Notes: | | | | | | | | | |
| Comments/Notes. | | | | | | | | | |
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