

## **Application for Sign Permit**

APPLICANT:		
MAILING ADDRESS:		
PHONE:	EMAIL:	
PROPERTY LOCATION:		
PROPERTY OWNER (if diffe	rent from applicant):	
MAILING ADDRESS:		
PHONE:	EMAIL:	
NATURE OF SIGN:	New sign	Replacement of existing sign
DESCRIPTION OF SIGN:		
LIGHTING OF SIGN:		
SIGN DIMENSIONS (not incl	uding support structure):	
For all signs provide a sketch of v	what the sign will look like.	
For a new sign provide a sketch o	r plan showing the location of	the sign on the property.
The permit fee for all signs is \$50	payable to the Town of Chesto	er.
APPLICANT SIGNATURE:		DATE:
**TO BE	COMPLETED BY THE ZO	NING ADMINISTRATOR**
RCEL MAP #: ZC	ONING DISTRICT:	FEE: PERMIT #:
MMENTS:		
CEIVED WITH APPLICATION FEE:		DATE:
	Zoning Administrator	

THIS IS NOT A PERMIT. A PERMIT, IF GRANTED, WILL BE ISSUED SEPARATELY