| | A DOMESTIC NOT | SIGN | IGN PERMIT APPLICATION | | | | |
|----------------------------------|-----------------------------------|--|------------------------|---|----------------------------|--|--|
| | | City of New Haven Building Department | | | MAKE IT HAPPEN HER | | |
| | James Turcio Building Official | 200 Orange Street, 5 th Floor, Suite 502 New Haven, Connecticut 06510 Telephone (203) 946-8045 – Fax (203) 946-8049 | | | Toni N. Harp Mayor | | |
| | | | | Building Pe | ermit No: B Entered by: | | |
| 1) | Address of Work Location: | | | N | Jew Haven, CT | | |
| 2) | Owner: | | | Telephone Number: (|) - | | |
| | Owner Address: | | | | | | |
| 3) | Applicant: | | | Telephone Number: (|) - | | |
| | Applicant Address: | | | | | | |
| 4) | Sign Contractor: | | | Telephone Number: (|) - | | |
| | Contractor Address: | | | | | | |
| 5) | Electrical Contractor: | | | Telephone Number: (|) - | | |
| | Electrical Contractor Addres | ss: | | | | | |
| | | | CONSTR | <u>UCTION</u> | | | |
| | Metal | Wood | Plastic | Gas with (metal) (wood) frame | e - combination | | |
| Length of Sign He | | | Height | Thickness | | | |
| Location of building Building I | | | Building Line | | | | |
| Height above sidewalk Projection | | | Projection from | m building | | | |
| Spe | ecial Conditions: | | | | | | |
| | METHOD O | F ERECTION | | (This must include Labo | n and Mataniala) | | |
| Siz | e of Angle or Flat Irons | | | (This must include Labo | | | |
| Chains or Sign Hooks | | | | Estimated Cost: \$ | | | |
| | g Bolts | | | | | | |
| Thru Bolts | | | | Cert. of Approval: \$ (<i>If applicable</i>) | | | |
| | | | | Total Fees: \$ | | | |

CERTIFICATION: I hereby certify that: I am the Owner of record of the named property or that, the proposed work is authorized by the Owner of record and/or I have been authorized to make this application as an Authorized Applicant. We agree to conform to all applicable laws, regulations, and ordinances. All information contained within is true and accurate to the best of my knowledge and belief.

| X Signature of Owner/Authorized Applicant | Date: <u>/ /20</u> |
|---|--------------------|
| Reviewed for Code Compliance by: | Date: <u>/ /20</u> |
| Received by: | Date: / /20 |
| xes Paid: Yes No Plans: Yes 1 | No Attached Coop |

| Zone By Right | Variance | Special Exception | | | | | | |
|--|-------------------|--|--|--|--|--|--|--|
| BUSI | NESS SIGN – [| Yes No | | | | | | |
| Sign projects 12" over sidewalk - 🗌 Yes 🗌 N | No | Establishment above ground floor - 🗌 Yes 🗌 No | | | | | | |
| Establishment Building less than 100 sq. feet - | Yes No | D Lot area | | | | | | |
| Area/Foot Length 4 - 3 - 2 - 1 Dimension of front wall(s) | | | | | | | | |
| Total Area - Present business sign(s) | | Sq. Ft. size of new sign | | | | | | |
| | | | | | | | | |
| ADVERTISING SIGN – Yes No | | | | | | | | |
| Note: (Business "D" No Height Restriction by Zoning) must meet Building Code Requirements. | | | | | | | | |
| Continuous Face separated by 2' or less - 🗌 Yes 🗌 No; distance between advertising signs (100' minimum) | | | | | | | | |
| Wall Sign Not Higher than 20' - 🗌 Yes 🗌 N | 0 | Roof Sign - 25' high (1 story) Yes No | | | | | | |
| No Higher than 20' above surface of the wides | t street toward w | which sign is oriented - | | | | | | |
| | | | | | | | | |
| BUSINESS & ADVERTISEMENT SIGNS | | | | | | | | |
| Ground Sign 20' of landscaping - | No - Yard Re | quirements of Section 43 & 47 🗌 Yes 🗌 No | | | | | | |
| Total Coverage all signs 1/3 wall area - 🗌 Ye | s 🗌 No | is oriented to residential zone 🗌 Yes 🗌 No | | | | | | |
| | | | | | | | | |
| RESIDENTIAL SIGNS | | | | | | | | |
| Home occupancy – 1 sq. ft. 🗌 Yes 🗌 No | Name o | f resident & number 1 sq. ft. 🗌 Yes 📄 No | | | | | | |
| Name and purpose of building 3 sq. ft. Yes No height 20' Yes No | | | | | | | | |
| Half front yard requirements [] Yes [] No temporary construction 20 sq. ft. 10' inside front line [] Yes [] No | | | | | | | | |
| | | | | | | | | |
| NON-CO | NFORMING U | J SE - 🗌 Yes 🔲 No | | | | | | |
| Ten (10) percent belt type sign Yes No total area front wall | | | | | | | | |
| Total existing signs | | | | | | | | |
| Name of Sign | | | | | | | | |
| DIAGRAM: DRAW ALL SIGNS EXISTING (NOTE: IF MORE WORK SPACE REQUIRE | | SIGNS, ALL FACES OF BUILDING IF POSSIBLE ERETO) | | | | | | |
| | _ Date:/ | /20 | | | | | | |
| Reviewed and approved by Zoning | | | | | | | | |
| Department Comments: | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |