

Angola Sign Permit and Application Form (ILP)

CITY OF ANGOLA - OFFICE OF ECONOMIC DEVELOPMENT AND PLANNING
Angola City Hall, 210 North Public Square, Angola, Indiana 46703
260-665-7465 (Phone) 260-665-9164 (Fax)
Email: vlives@angolain.org / rhicks@angolain.org

Date: _____ SIGN PERMIT No. S-15-_____ BS&A Permit #: _____

PERMIT REQUIREMENTS: Provide a site plan, indicating the exact location of the proposed signage as well as any existing signage on the property. Also, indicate on the site plat the proposed setbacks from the right-of-way, property line and curbing. Provide a drawing indicating the dimensions of the sign, as well as the height from the ground to the top of the sign.

SIGN PERMIT INFORMATION: Unified Development Ordinance for Sign Standards can be found in Article 5, begin on page 5-72. Filing requirements Article 9, begin on page 9-5.

APPLICANT INFORMATION

APPLICANT NAME: _____

ADDRESS: _____

PHONE: _____ FAX: _____ EMAIL: _____

PROPERTY OWNER(S) INFORMATION

PROPERTY/BUILDING OWNER: _____

ADDRESS: _____

PHONE: _____ FAX: _____ EMAIL: _____

SIGN INFORMATION

Provide Details of Proposed signs: _____

Describe any existing signs on premises: _____

- ADDRESS/LOCATION: _____
- Type of Sign: (Permanent / Wall / Monument / Temporary / Special Event)
- Wall Facade - Lineal front footage of building: _____
- Size of signs: _____ X _____ = _____ Sq. ft. / # of Signs faces: _____
- Height: _____ - Width: _____ Sign area: _____
- Illuminated: Yes / No - Electrical Permit needed: Yes / No

Certification: I certify that the information contained on this form is complete and accurate. The property owner has provided permission in writing or by signing this application form.

Applicant Signature: _____ **DATE:** _____

Property Owner Signature: _____ **DATE:** _____

DEPARTMENT USE AND INFORMATION ONLY Sign Ordinance Sections: Article 05 - Section (_____) Pages: _____

Date Received: _____ Received By: _____

JURISDICTION: CORPORATE LIMITS _____ EXTRA TERRITORIAL AREA: _____

BZA/PC APPROVAL/HPC DATE: (IF APPLICABLE) _____

ZONING DISTRICT: PR AG AC ER R1 R2 R3 R4 R5 TR LR HM UV IS NC DC C1 C2 HC I1 I2 I3 HI (HOME BUSINESS)

Date Approved: _____ Date Denied: _____

FEES: \$0.50 PER SQ. FOOT OF SIGN FACE _____ MINIMUM FEE: \$25.00

PERMIT FEE(S) RECEIVED: \$ _____ ACCOUNT #101-2101.00