



CITY OF NEWCASTLE Community Development Department

Sign Permit Application

Application Date:	Intake Staff :	Amount Due:	Permit #:
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SIGN PERMIT APPLICATION

Owner of Sign _____ Phone _____

Mailing Address _____ City _____ State _____ Zip _____

Applicant _____ Phone _____

Mailing Address _____ City _____ State _____ Zip _____

Email Address _____

Contact Person _____ Phone _____

Mailing Address _____ City _____ State _____ Zip _____

Email Address _____

Contractor _____ Phone _____

State License # _____ Newcastle Business License# _____

Mailing Address _____ City _____ State _____ Zip _____

- Estimated project cost: \$ _____
- Type of Sign: Marquee Monument Pedestal Pole Projecting Wall
- Illumination: Internal (Cabinet) Internal (Letters only) External Non-Illuminated
 Other (Describe) _____
- Sign area (sq. ft.): _____
- Sign Dimensions: _____
- Street frontage of entire property (ft.): _____
- Number of tenants or available business spaces on the property: _____
- List the size and type of all existing signs associated with the business:

- List the type and size of all other existing signs on the property:

- Is this an application for an off-premise sign? Yes No

I CERTIFY UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION FURNISHED BY ME IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Owner/Agent: _____ Date: _____