



# SIGN PERMIT APPLICATION PACKET

**Community Services**

**405-670-7314**

3701 SE 15th Street

Del City OK 73115

[www.cityofdelcity.com](http://www.cityofdelcity.com)

Fax: 405-670-7368

## APPLICATION CHECKLIST

- \_\_\_\_\_ Signed Application
- \_\_\_\_\_ Construction Drawings (2 Paper Sets)
- \_\_\_\_\_ Construction Drawings (Electronic)
- \_\_\_\_\_ Site Plan (2 Paper Sets)
- \_\_\_\_\_ Site Plan (Electronic)
- \_\_\_\_\_ Applicant Certification
- \_\_\_\_\_ Property Owner Certification

### REQUIREMENTS:

1. **DRAWING OF SIGN MUST BE ATTACHED.**
2. If sign is to be mounted on a pole, this application must be accompanied by two (2) sets of prints sealed by a professional engineer registered in the State of Oklahoma certifying the structure will withstand 80 mph winds.
3. Provide two (2) sets of plans indicating the scope and structural detail of the work to be done including details of all connections, any lines, supports and footings, and material to be used.

The drawings electronic version may be submitted either by CD, DVD, or email PDF at [lmccann@cityofdelcity.org](mailto:lmccann@cityofdelcity.org) .

### **FOR STAFF USE ONLY:**

<b>Code</b> _____	<b>DATE SUBMITTED:</b> _____
<b>Zoning</b> _____	<b>ENTERED INCODE BY:</b> _____
<b>Floodplain</b> _____	<b>PERMIT APPROVED:</b> _____
<b>Stormwater</b> _____	<b>DUE: \$</b> _____ <b>RECEIPT NO.</b> _____
<b>Fire Department</b> _____	
<b>Inspections</b> _____	



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## CONTRACTORS INFORMATION:

COMPANY NAME: \_\_\_\_\_ CITY LICENSE NO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NO: \_\_\_\_\_ FAX NO: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

SIGN LOCATION (ADDRESS): \_\_\_\_\_ ZIP: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NO: \_\_\_\_\_ FAX NO: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

## SIGN INFORMATION:

MATERIAL: \_\_\_\_\_

TYPE: PERMANENT

ELECTRICAL WIRING: YES  NO  (IF YES, ELECTRICAL PERMIT IS REQUIRED)

HOW WILL SIGN BE ATTACHED: \_\_\_\_\_

# OF SIGNS: \_\_\_\_\_ AREA OF EXISTING SIGNS \_\_\_\_\_ SQ. FT

MAX HEIGHT: \_\_\_\_\_ MAX WIDTH: \_\_\_\_\_ SQ FT: \_\_\_\_\_ EST. COST \$: \_\_\_\_\_

**APPLICANT CERTIFICATIONS**

I certify that this permit application is complete and accurate, to the best of my knowledge. \_\_\_\_\_ (initial)

I understand that, by submitting this application, I agree to comply with all adopted codes and applicable laws/ordinances. \_\_\_\_\_ (initial)

I understand that inspections are required as provided for in the City's adopted codes, that inspections must be arranged at least 48 hours in advance, that inspections are scheduled and performed on the basis of need and based on the nature of the work being inspected, and that failed inspections may lead to re-inspection fees. \_\_\_\_\_ (initial)

*I hereby submit this application for a Sign Permit.*

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

**PROPERTY OWNER CERTIFICATION**

I certify that the applicant has my authorization to submit this sign permit application. I certify that I understand that as the Property Owner, I am ultimately responsible for anything that is done to the property. \_\_\_\_\_ (initial)

\_\_\_\_\_  
PROPERTY OWNER SIGNATURE

\_\_\_\_\_  
DATE