

Customer Number

Permit Number



# Ketchikan Gateway Borough

## Sign Permit Application

Chapter 18.115

Received By

Sign Permit ~ No Fee

After-the-Fact ~ No Fee

Business / Organization Name

Business / Organization Contact

Business / Organization Phone

Location (address or parcel number)

**Sign(s) Information (required)**

<input type="checkbox"/> Sign Mock-Up Attached (including wording and/or graphics)	<input type="checkbox"/> Sign Mock-Up Attached (including wording and/or graphics)	<input type="checkbox"/> Sign Mock-Up Attached (including wording and/or graphics)	<input type="checkbox"/> Sign Mock-Up Attached (including wording and/or graphics)
<input type="checkbox"/> Sign Location on Property Attached	<input type="checkbox"/> Sign Location on Property Attached	<input type="checkbox"/> Sign Location on Property Attached	<input type="checkbox"/> Sign Location on Property Attached
<input type="checkbox"/> Schematic Attached (showing: dimensions, materials, colors, lighting, wind load)	<input type="checkbox"/> Schematic Attached (showing: dimensions, materials, colors, lighting, wind load)	<input type="checkbox"/> Schematic Attached (showing: dimensions, materials, colors, lighting, wind load)	<input type="checkbox"/> Schematic Attached (showing: dimensions, materials, colors, lighting, wind load)

Other Notes

I, the undersigned, have read and discussed this sign permit with the Planning Department Staff and fully understand the terms and conditions contained herein. I hereby certify that I am the owner of the property represented in this application and that the information included herein is true, correct, and complete to the best of my knowledge. I understand that the issuance of a Sign Permit in no way precludes me to comply with all other applicable Local, State, and/or Federal laws or regulations.

Property Owner (required) \_\_\_\_\_ Date \_\_\_\_\_

Second Owner or Applicant \_\_\_\_\_ Date \_\_\_\_\_

Print Property Owner (required) \_\_\_\_\_

Print Second Owner or Applicant \_\_\_\_\_

Permission is hereby granted to perform the above with the conditions listed below that the same must be in accordance with the Ordinances and the Laws of the State of Alaska. Work MUST begin within 60 days or this permit will become VOID.

Zoning Official \_\_\_\_\_ Date \_\_\_\_\_