

Department of Inspections Sign Permit Application

Office Use Only - Do Not Write In This Area. Owner VerillCation: DB: PG:		
UDO#PIN#		
Permit# Permit Fees: \$		
Zoning District: Flood Zone: Watershed? CAMA District?	_	
Workers Comp Number: Expiration Date:		
Residential or Commercial:Principal Use:		
Select Type of Sign Below:		
Wall Sign Window Sign Projecting Sign Awning Freestanding		
Commercial Monument Portable Do You Need Electrical? <u>Yes No</u>		
Select Sign (s) Size: 0-16 Sq Ft 17-32 Sq Ft Over 32 Sq Ft		
Total Sign(s) Sq Ft: Sign Project Cost (REQUIRED): \$		
1) PROJECT INFORMATION		
Project Address:		
City: State: North Carolina Zip Code:		
Township: Courthouse (Camden) Shiloh South Mills		
- Common Countrious (Cumon Countrious)		
2) RESPONSIBLE PARTY Property Owner or General Contractor		
Only-Property Owner continue to #3		
Contractor Company Name: Email:		
Contact Name: Phone Number:		
Address:		
City: Zip Code:		
General Contracting License #: Expiration Date:		
3) OWNER INFORMATION Property Owner: Email:		
Property Owner:Email:	—	
Address:	_	
City:State:Zip Code:		
Phone:		
4) Wall Sign: Front of Building Height: Width:		
Window Sign- Total Sq Ft of Glass Area on Front of Building:		
Number of Signs on Lot: Does Sign Need Footing? Yes No		
Sign Width: Length: Height:		
5) Will an Electrical Permit be needed? Yes No (If Yes Trade Affidavit MUST be submitted.)		
Name of Electrical Contractor: License #: Contact Number: Expiration:		
- LAPIRED .		

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the approved plans and specifications for the project permitted herein. I do certify I have download & read memos A & B on Camden County Planning, Zoning & Flood Department Website related to the building process.

Owner/Applicant Signature:	Date [.]