

Permit # \_\_\_\_\_  
Date Issued: \_\_\_\_\_

APPLICATION FOR SIGN PERMIT

City of Wilson, North Carolina  
Planning/Inspections Dept.

ALL QUESTIONS MUST BE COMPLETELY ANSWERED

Owner: \_\_\_\_\_ Erector: \_\_\_\_\_  
Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ City: \_\_\_\_\_  
Tel. \_\_\_\_\_ Tel. \_\_\_\_\_

Privilege License No. \_\_\_\_\_

Location by street address of the proposed sign: \_\_\_\_\_

Zoning Classification: \_\_\_\_\_

Note: It is advisable to consult a City Planner to determine if the proposed sign complies with zoning regulations. No sign shall be erected, repaired, or altered without first receiving a sign permit from the City of Wilson.

SIGN TYPE, DIMENSIONS, AND RELATED INFORMATION

1. Type  
(A) Freestanding \_\_\_\_\_ (F) Off-Premise \_\_\_\_\_  
(B) Wall \_\_\_\_\_ (G) Identification \_\_\_\_\_  
(C) Roof \_\_\_\_\_ (H) Other \_\_\_\_\_  
(D) Projecting \_\_\_\_\_  
(E) Temporary \_\_\_\_\_
2. Approximate cost \_\_\_\_\_ dollars.
3. Application is to:  
( ) Erect ( ) Repair  
( ) Alter ( ) Other (Describe) \_\_\_\_\_
4. Display surface size:  
(A) Length \_\_\_\_\_ ft. \_\_\_\_\_ inches  
(B) Height \_\_\_\_\_ ft. \_\_\_\_\_ inches  
(C) Size of extensions \_\_\_\_\_ (for off-premise signs)
5. Approximate Weight \_\_\_\_\_ lbs.
6. Total height of sign once erected (from finished ground grade to top of sign)  
\_\_\_\_\_
7. For roof signs, give the total height of the building of which sign will be located:  
\_\_\_\_\_

8. Building and Lot Frontage:  
 (A) Building frontage: \_\_\_\_\_ ft.  
 (B) Lot frontage: \_\_\_\_\_ ft.
9. Sign shall be (check one)  
 ( ) illuminated  
 ( ) non-illuminated
10. If required by ordinance, give wind pressure load \_\_\_\_\_, and working stress load \_\_\_\_\_.
11. Does electrical system for sign have Underwriter's Label? \_\_\_\_\_
12. If plastic, does sign conform to ASTM D6 35-63?  
 Yes ( ) No ( )
13. Of what material will the sign be constructed?  
 Face \_\_\_\_\_ Frame \_\_\_\_\_ Support \_\_\_\_\_
14. For Wall or Projecting Signs:  
 (A) Type of wall to which sign will be secured:  
 Masonry ( ) Frame ( )  
 (B) For wall sign, inner edge will be \_\_\_\_\_ inches from the building.  
 (C) For wall sign, outer edge will be \_\_\_\_\_ inches from the building.  
 (D) Lower edge of sign will be \_\_\_\_\_ feet above the street, alley, sidewalk, or property grade.  
 (E) Sign will project \_\_\_\_\_ inches from the building.
15. Will sign obstruct a fire escape, window, or door? \_\_\_\_\_
16. Wording of sign: \_\_\_\_\_  
 \_\_\_\_\_
17. For temporary signs, how long will sign be used? \_\_\_\_\_
18. Additional information required for off-premise signs:  
 A. Map, drawn to scale, showing the following:  
 (i) Landscaping plan for a 25-foot diameter area around each support.  
 (ii) Street name(s), scale, and north arrow.  
 (iii) Location of the sign on the lot showing the distance from the center of each support to the center line of the nearest street.  
 (iv) Distance of extreme outermost side edges or face of sign to the right-of-way.  
 (v) Identification of all zones within 300 feet of the outer edges of the sign.

(vi) Person(s) or firm(s) preparing the description.

19. REQUIRED SKETCHES\*

NOTE: Where necessary, a detailed and scaled drawing may be required for the following information.

SKETCH OF PROPOSED SITE IN RELATION TO ADJOINING STRUCTURES AND STREETS  
DRAWN TO APPROXIMATE SCALE:\*

\*Not necessary if shown on scaled blueprints or drawings of the plans.  
SKETCH(S) OF ACTUAL SIGN INCLUDING SIZE, WORDING, OTHER DIMENSIONS, AND  
TOTAL HEIGHT DRAWN TO APPROXIMATE SCALE:\*

APPLICANT'S CERTIFICATION

The undersigned certifies that the above statements are true to the best of his knowledge and belief. By signing this application, the applicant agrees that if this application is approved, the sign will conform in every detail with the requirements of the North Carolina State Building Code and the ordinances of the City of Wilson relative to advertising signs.

Responsible Applicant (Firm): \_\_\_\_\_

By: \_\_\_\_\_

Date: \_\_\_\_\_

\* Not necessary if shown on scaled blueprints or drawings of the plans.

FOR DEPARTMENT USE ONLY

Does sign conform to the North Carolina State Building Code and the City Code?

\_\_\_\_\_ If not, state why:

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See Attached sheet \_\_\_\_\_

PERMIT APPLICATION APPROVAL

Zoning Approval: \_\_\_\_\_  
Planner

Date: \_\_\_\_\_

Building Approval \_\_\_\_\_  
Inspector

Date: \_\_\_\_\_