

Permit # _____
Date Issued _____

APPLICATION FOR TEMPORARY SIGN PERMIT

Planning & Development Services
City of Wilson

Business: _____
Address: _____
Mailing Address: _____
City: _____
Telephone# _____

Location by street address of the proposed temporary sign: _____

Sign Type, Size, and Related Information

1. Type of proposed sign:
_____ Banner _____ Freestanding _____ Portable

2. Display surface area of sign
(A) Height _____ feet _____ inches
(B) Width _____ feet _____ inches

3. Building and lot frontage
(A) Building frontage: _____ feet
(B) Lot Frontage: _____ feet

4. How long will the sign be used? _____

5. Sign shall be (check one)
() illuminated
() non- illuminated

6. Of what material will the sign be constructed? _____

7. Wording of sign? _____

Please Note:

- (A) No sign shall be displayed **before** permit is approved.
- (B) All signs must be located on private property, out of the sight distance triangle, and out of the public right of way.
- (C) No signs are allowed to be attached to utility poles or street signs.
- (D) No illuminated temporary sign may have flashing or intermittent lights.

Applicant Certification

The undersigned certifies that the above statements are true to the best of his/her 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.

Applicants signature: _____ Date: _____

******If you have any questions, please contact our office at 399-2219 or 399-2220******

OFFICE USE ONLY

Map-Block-Lot number: _____ - _____ - _____
Zoning Classification _____

_____ Approved _____ Disapproved

If disapproved, why?

Permit Application Approval

Zoning Approval _____ Date _____

Inspector Approval _____ Date _____

Date Permit Expires _____