



TM # _____
STAFF USE ONLY

COMMONWEALTH OF VIRGINIA
COUNTY OF CUMBERLAND

Sign Permit Application

Form must be completed in ink, Pencil will not be accepted.

1. Attachments Required:

- Sketch or plat showing the location of the sign on the property; and
- Sketch of the sign showing dimensions such as length and width of sign area, height, the design and wording on the sign face

2. Property Owner (list multiple owners separately, attach additional sheet if necessary)

Name:			
Address:	State:	ZIP:	
Phone:	Fax:		
Cellular:	E-mail:		

Note: If the property owner(s) as shown by the tax commissioner's office is (are) not the applicant, the owner's (owners') signed and notarized authorization(s) must accompany this application.

3. Applicant (list if not the same as owner)

Name:			
Address:	State:	ZIP:	
Phone:	Fax:		
Cellular:	E-mail:		

4. Firm Creating Sign (if not created by property owner or applicant)

Firm Name:			
Individual Name:			
Address:	State:	ZIP:	
Phone:	Fax:		
Cellular:	E-mail:		

5. Sign Information

Property Location _____

Sign Location on Property _____

General Sign Description _____

Replacing an existing sign? If so describe existing sign: _____

Located on Tax Parcel:		
Magisterial District		
Parcel Acreage		
Parcel Zoning		
Type of Sign (see Sec. 74-622 for listing)		
Total Height (from ground to top of sign)	_____ ft. from ground level	
Double-faced sign?	Yes / No	
Dimension of Sign (square footage of sign face)	_____ Ft. X _____ Ft. = _____ sq. ft.	
Distance from Property Lines	Front: _____ Sides: _____ Rear: _____	
Distance from centerline of any roadway	_____ ft. from _____ (route # or name of rd)	Sign cannot be in VDOT right of way
Illuminated?	Yes / No	Must be shielded and not produce glare onto adj. roads or properties

6. Certification

*If signatory is not owner of record, the attached "Owner/Agent Agreement" must be signed and notarized.

The undersigned hereby certifies that all information submitted with this application is complete, true and correct. I understand any errors and/or omissions may lengthen the time to process the request.

_____ Date
Print Name of property owner or authorized agent

_____ Date
Signature of property owner or authorized agent

DEPARTMENT USE ONLY		
Application Date:	Fee: \$10.00	Application #
Magisterial District:	Fee paid:	Staff:
Sign Permit Approval:		
<i>Signature of Zoning Administrator</i>		<i>Date</i>

Owner/ Agent Agreement

(only needed if applicant is different than owner)

The undersigned is (are) the owner (s) of record of the property identified by the Cumberland County Tax Map Number (s)

_____ ,

Located at

_____ ,

Cumberland County, Virginia. The Undersigned hereby gives (give) consent and approval to

to act on his/her (their) behalf as his/her (their) agent to proceed with the attached application on the property referenced herein.

Print Name of property owner 1

Date

Signature of property owner 1

Date

Print Name of property owner 2

Date

Signature of property owner 2

Date

State of Virginia

County of Cumberland to Wit:

The foregoing instrument was acknowledged before me this _____ day of _____ 20____ by

_____.

Printed name of property owners

Notary Public printed name

Notary public signature

Note: Signature(s) of property owner(s) must be notarized.