

Sign Permit

Date: _____



Department of Planning and Community Development
PO BOX 1600 Ashland, Virginia 23005
phone: (804) 798-1073 www.ashlandva.gov

Business Contact

Name: _____ Phone: _____

Company: _____

Address: _____

Email: _____ Fax: _____

Business type (check one): New Existing

Location Information

Address: _____

GPIN: _____ Zoning: _____

Sign Chart and Layout

Complete the chart (back of page) and attach details for each sign with complete dimensions, materials, and approximate wording. If sign is not attached to a building, attach a sketch plan showing the sign location with setback from property line and building and/or tenant space dimensions.

Damages Statement

The Town of Ashland is protected and held harmless for any and all claims or demands for damages by reason of any negligence of the sign hanger, contractor, or his agents, or by reason of defects in the construction or damages resulting from the collapse or failure of any sign or part thereof. This signed statement shall remain in effect for the life of the sign, per Sec. 21-215(a) of the Town Code.

X. _____ Date: _____ Name (print): _____

COMPLETED BY STAFF ONLY

Fee

\$50 – Sign Permit

\$0 – Temporary Sign or Designated Arts

Amount Paid: _____ Date: _____

Approval: _____ Date: _____

Complete the chart and attach details for each sign with complete dimensions, materials, and approximate wording.

Width of building or business street-facing façade = _____ (feet)

See the NEXT PAGE for images of sign types

Type	Area in Sq. Ft. (Height x Width)	Illuminated (Yes or No)	Height (ground to top of sign)	Details Attached (Yes or No)	Staff Review

Sign Layout (for all signs not attached to a building)

Attach a sketch plan showing the sign location with setback from property line and building and/or tenant space dimensions.