

**CITY OF ALBEMARLE  
ZONING SIGN PERMIT**

**JOB ADDRESS:**

\_\_\_\_\_

\_\_\_\_\_

**ZONING:** \_\_\_\_\_

**TAX #:** \_\_\_\_\_

**PROPERTY OWNER:**

\_\_\_\_\_

\_\_\_\_\_

**FREESTANDING SIGN #:** \_\_\_\_\_

**FAÇADE sq ft:** \_\_\_\_\_

**WINDOW sq ft:** \_\_\_\_\_

**WALL SIGNAGE ALLOWED sq ft:** \_\_\_\_\_

**WINDOW ALLOWED sq ft:** \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_

**Will signage have lighting?** \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_

**If so, will it be external or internal?** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_

**Signage with lighting shall meet NESC standards**

**BUSINESS NAME & CONTACT INFORMATION**

**FREESTANDING SIGNAGE SETBACKS**

**Front:** \_\_\_\_\_ **Rear:** \_\_\_\_\_

**Right:** \_\_\_\_\_ **Left:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_

**HEIGHT:** \_\_\_\_\_

TYPE SIGN	NO. OF SIGNS	DIMENSIONS	TOTAL SQ. FT.	PERMIT FEE
				DATE OF APPLICATION
				TAKEN BY
				PERMIT NO.
				COA NO.

**REMARKS:**

\_\_\_\_\_

\_\_\_\_\_

Additional permits may be required per NC building code. Contact Stanly County Permitting for additional information (704) 986-3675.

The undersigned hereby makes application as designated above, and agrees to conform to all applicable laws of the City of Albemarle and the State of North Carolina. The undersigned further states that all statements made herein are true.

**SIGNATURE OF APPLICANT** \_\_\_\_\_ **DATE:** \_\_\_\_\_ **OWNER CONTRACTOR AGENT**

**DENIED** \_\_\_\_\_ **GRANTED** \_\_\_\_\_ **NOT VALID UNLESS SIGNED BY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

This is a permit to erect signs only. Its issuance does not guarantee that the property to which it applies is in compliance with other laws and ordinances that might affect it and the owner may have to comply with other laws and ordinances with respect to this property.

**CITY OF ALBEMARLE**

**PO BOX 190, 144 NORTH SECOND STREET  
ALBEMARLE, NC 28002-0190**

**PHONE** (704) 984-9424  
**FAX** (704) 984-9835