



Planning & Neighborhood Services
P.O. Box 2430
Indian Trail, NC 28079
Telephone 704-821-5401
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SIGN APPLICATION

Zoning Permit Review

Submittal Requirements

- Completed Application
- Scaled rendering of sign including dimensions and proposed colors
- Building elevation showing placement of sign on the structure (if wall sign)
- Site plan of proposed location showing distances from rights-of-way, setbacks, etc. (if ground-mounted or free-standing sign)
- \$75.00 for permanent wall sign; \$125.00 for freestanding sign

General Information

Project Address _____

City _____ State _____ Zip _____

Shopping Center _____

Tax Parcel ID _____ Zoning Designation _____

Sign Description _____

Sign Approximate Value _____

Contractors Name _____ Phone _____

Contact Information – Applicant/Lessee

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Signature _____ Date _____

Contact Information – Property Owner

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Signature _____ Date _____

Sign Specifications

Sign Dimensions _____
(Include dimensions for each proposed sign)

Sign Thickness/Width _____
(Applicable only for wall-mounted signs)

Sign Square Footage _____
(Include square footage for each proposed sign)

Sign Height _____
(as measured from the ground to the top of the sign)

Front Facade Dimensions (building and/or suite) _____
(Applicable only for wall mounted signs)

For Office Use Only:

Received: _____ Received by: _____

Notes:
