



City of Warrenton

200 West Booneslick

Warrenton, MO 63383

Phone: 636-456-3535 Fax: 636-456-1336

www.warrenton-mo.org

PERMIT #: _____

ZONING DISTRICT: _____

Sign Permit Application

Sign Location: _____

Applicant Name: _____

Applicant Email: _____

Address: _____ **Phone:** _____

Property Owner: _____

Address: _____ **Phone:** _____

Contractor:

An Occupational License for all contractors and/or subcontractors performing any work within the scope of the permit is required prior to the issuance of the permit.

Contractor Name: _____

Address: _____ **Phone:** _____

Type of Sign:

- Ground
- Wall/Attached
- Hanging
- Other
- Projecting
- Billboard/Pole
- Electronic Message Board Sign

Size: Horizontal: _____ Vertical: _____ Area: _____

Single Sided Double Sided Other **Total Area:** _____

Height Above Ground Top of Sign: _____ Bottom of Sign: _____

Illuminated: Yes No

General Sign Requirements: (Indicate all items submitted)

- Blueprint or Ink Drawing of sign plans showing:
 - Sign message, colors, and graphics to be used
 - Specifications of sign (materials, construction, illumination, etc.)
 - Method of attachment to building or ground
- Written consent of property owner (if applicable)
- Site plan for Billboard/Pole and ground signs
- One (1) Copy of stress calculations sealed by a registered structural engineer (Billboard/Pole signs)

I have read the above application and know the contents thereof, certifying the same to be true and correct. I further state that I am familiar with laws governing the construction and erection of signs within the City of Warrenton and that the above sign will be erected in conformity therewith. I understand that the temporary sign permit is non-transferable.

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and agree to conform to all applicable laws of this jurisdiction. The applicant further warrants the truthfulness of all information in the application and if any information provided is incorrect, or if the permit was issued wrongfully, the permit may be revoked. I understand that a commercial occupancy is required to file a business license application with the City Clerk's office.

Applicant Signature

Applicant Name (Printed)

Date

FOR CITY USE ONLY

Approval: Public Works _____ P&Z Director _____ Building Commissioner _____