



SIGN PERMIT APPLICATION

I certify that all the information on this application and any documentation attached are correct to the best of my knowledge.

Property Owner Name: _____

Contractor Name: _____

Contractor Phone Number: _____ Email: _____

Residential Sign - \$100.00 Commercial Sign - \$100.00 Temporary Sign, 30 days or less - \$50.00

Property Address: _____

Type of Sign: Wall Sign Freestanding Sign Projecting Signs Hanging Sign
 Window Sign Canopy/Awning Sign A-Frame Sign Banner Sign
Other: _____

Number of Requested Signs: _____ Size of Sign(s): _____

- *All Contractors are required to have a Town of Lyman Business License before the start of any work.*
- *I understand permits for permanent signs requiring engineering and/or electrical must be obtained through CC&I Services at www.cciservicesllc.com (864) 586-6111.*
- *I understand that a Final Zoning Inspection will be conducted upon the completion of this project.*

By signing below, I verify that I have included with this application a description of the proposed sign which depicts size, shape, colors, materials, designs/wording, illumination type, electrical details and location on the property.

Signature of applicant

Date

----- For Official Use Only -----	
[] APPROVED	[] DENIED
Zoning Administrator: _____	Date: _____
Current Zoning District: _____	Fee Paid: _____
Setbacks: Front _____ Left _____ Right _____ Rear _____	
Comments/Conditions: _____	
