

BUILDING DEPARTMENT  
**CITY OF CHARLESTON, WEST VIRGINIA**  
**SIGN PERMIT APPLICATION**  
(Enclose self-addressed, stamped envelope for mail or fax permits)

SIGN CONTRACTOR: \_\_\_\_\_ REG. NO. \_\_\_\_\_

SIGN CONTRACTOR ADDRESS: \_\_\_\_\_

OWNER NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

OWNER'S ADDRESS: \_\_\_\_\_

CONSTRUCTION ADDRESS: \_\_\_\_\_

TAX MAP AND PARCEL NO. OF CONSTRUCTION ADDRESS: \_\_\_\_\_

GENERAL CONTRACTOR NAME: \_\_\_\_\_

Building Permit No. B No. \_\_\_\_\_ Classification: \_\_\_\_\_

Project Cost: \$ \_\_\_\_\_ Value of Sign: \$ \_\_\_\_\_

Permission is hereby requested to: Erect \_\_\_ Repair \_\_\_ Alter \_\_\_ Move \_\_\_

Type of Sign: Billboard \_\_\_ Wall Sign \_\_\_ Projecting Sign \_\_\_ Roof Sign \_\_\_  
Ground Pole Sign \_\_\_ Temporary Sign \_\_\_

Size of Sign: Length \_\_\_ Height \_\_\_ Total Sq. Ft. \_\_\_

Double Face \_\_\_ Single Face \_\_\_ Permit Fee \$ \_\_\_\_\_

Int. Lighted \_\_\_ Ext. Lighted \_\_\_ Not Lighted \_\_\_

Attach sketch of sign and approvals from Planning and Zoning Department.  
All work to be done in compliance with the laws and ordinances of the City of Charleston and in accordance with approved zoning and plans and specifications on file with the Building Department.

\_\_\_\_\_  
Authorized Representative Requesting Permit

\_\_\_\_\_  
Date Requested

\_\_\_\_\_  
Signature of Owner/Contractor or Authorized Representative