

Town of Bunn
 601 Main Street
 P.O. Box 398
 Bunn, NC 27508



| SIGN FEES | |
|--------------|---------|
| SIZE OF SIGN | FEE |
| | \$50.00 |

SIGN PERMIT APPLICATION

Application Instructions: Complete all applicable sections and return to the Town of Bunn. No incomplete application will be processed.

A site plan must be submitted with this application showing dimensions of the sign, maximum height, and location on the property, including distances from the property line. Prior to installation, a building permit may be required from the Franklin County Inspections Department.

| | | |
|---|--------------------------|---------------------------|
| Owner's Name (As Listed on Tax Records) *: | Applicant's Name: | Contractor's Name: |
| Street Address: | Street Address: | Street Address: |
| City, State Zip | City, State Zip | City, State Zip |
| Contact phone #: | Contact phone #: | Contact phone #: |
| Email Address: | Email Address: | Email Address: |

If the owner is different from the tax record, you must provide proof of ownership.

- 1) How many existing signs are located on the building or property? _____
- 2) What is the square footage of the existing sign? _____
- 3) What is the total square footage of the proposed sign? _____
- 4) Is the applicant going to replace any existing sign(s)? If so, what sign is being replaced and how many?

Name of Business: _____

Property Address: _____

Wording of Sign: _____

SELECT THE STRUCTURE TYPE & FILL IN THE TABLE.

| Quantity | Structure Type (Section 402) | Dimensions | Square Feet | Height | Material | Temporary Sign Dates (if needed) |
|----------|---------------------------------|------------|-------------|--------|----------|-------------------------------------|
| | Ground | | | | | |
| | Marquee | | | | | |
| | Pole | | | | | |
| | Projecting | | | | | |
| | Roof | | | | | |
| | Suspended | | | | | |
| | Wall | | | | | |
| | Window | | | | | |
| | Awning | | | | | |
| | Banner | | | | | |
| | Poster | | | | | |
| | Portable | | | | | |
| | Development Sign | | | | | |
| | Playbill | | | | | |
| | Temporary | | | | | |

I certify that all the statements made in this application and any attached documents are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that false information may be grounds for rejection of this application. Authorized Town of Bunn representatives are granted the right of entry to make evaluations or inspections and to release information upon public request.

Applicant Signature

Date

Signature of Property Owner or Authorized Agent

Date

FOR STAFF USE ONLY

| | |
|----------------------------------|---|
| Received by: _____ Fee: _____ | PIN #: _____ |
| Date Paid: _____ How Paid: _____ | Zoning: _____ Front Setback: _____ |
| Check #: _____ Receipt#: _____ | Side Setback: _____ Rear Setback: _____ |