

# SIGN PERMIT APPLICATION

Sign Permit Number \_\_\_\_\_



85 South Main Street  
Cleveland GA 30528  
Phone 706.85.2017  
Fax 706.219.3220  
Email: [permitting@cityofclevelandga.org](mailto:permitting@cityofclevelandga.org)

Application Date \_\_\_\_\_

Master Sign Plan **Yes/No** Sign District \_\_\_\_\_

## PROPERTY INFORMATION

BUSINESS OWNERS NAME \_\_\_\_\_

BUSINESS NAME \_\_\_\_\_

PHYSICAL ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

## SIGN CONTRACTOR INFORMATION

SIGN COMPANY NAME \_\_\_\_\_

CONTACT NAME \_\_\_\_\_

PHYSICAL ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

BUSINESS LICENSE NUMBER \_\_\_\_\_

## BUILDING/LAND OWNER INFORMATION

LAND/BUILDING OWNERS NAME \_\_\_\_\_

LAND/BUILDING OWNERS ADDRESS \_\_\_\_\_

PHYSICAL ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

## SIGN INFORMATION

**Check all that apply:**      DIGITAL      AWNING      BILLBOARD      DIRECTORY      DOUBLE SIDED  
                                 GROUND      HANGING      MONUMENT      ROOF/WALL      WINDOW

Size of Sign \_\_\_\_\_ Shape of Sign \_\_\_\_\_ Colors of Sign \_\_\_\_\_

Lighted    Yes      No    If yes, how will sign be lighted?

How will the sign be mounted \_\_\_\_\_ Materials Used: \_\_\_\_\_

**Note: A color sketch of the sign or a professional illustration must be presented with the application for review. A DOT permit must be presented with the application if the sign will be located on a State Highway. Contact GDOT at 770.718.5058.**

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Taxpayer's Name: \_\_\_\_\_

Map # \_\_\_\_\_ Parcel # \_\_\_\_\_

All property taxes on the above map and parcel were paid on \_\_\_\_\_

Tax Clerk's Signature: \_\_\_\_\_ Date \_\_\_\_\_

**Contractor's Affidavit**

The under signed hereby states that all subcontractors listed below current Occupational License to perform work in the category listed. Applicant acknowledges that he/she is aware of material fact in the application on which the permit was based. Applicant further acknowledges prosecution. GA Criminal Code, Section 26-2402 (False Swearing) calls for possible fine of not more than \$1000.00 or imprisonment for not less than one (1) and not more than five (5) years or both.

\_\_\_\_\_  
Contractor Print Name Signature Date

**SIGNATURES**

Application is hereby made according to the laws and ordinances of the City of Cleveland, Georgia and/or on the application and attachments. If a permit is issued, I agree to conform to all laws and ordinances regulating the same. Any violation to the codes adopted by the city and any fines, penalties, etc., that are incurred are the responsibility of the applicant. By my signature below, I certify that the application and the attached data are true and correct.

\_\_\_\_\_  
Applicants Print Name Signature Date

\_\_\_\_\_  
Property Owner Print Name Signature Date

\_\_\_\_\_  
Witness Print Name Signature Date

*Neither the approval of a permit under the provision of this ordinance, nor the compliance with the provisions of this ordinance shall relieve any person from the responsibility for damage to any person or property otherwise imposed by law nor impose any liability upon the City of Cleveland for damage to my person or property.*

**FOR OFFICE USE**

Approved Yes  No

Approved By: Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_