



PERMANENT SIGN APPLICATION

TOWN OF MONROE
PLANNING & ZONING DEPARTMENT
7 Fan Hill Road, Monroe, CT 06468
Tel. (203) 452-2812

INSTRUCTIONS

This application will not be accepted unless accompanied by a rendering of the sign, professionally prepared by the sign fabricator/installer. Hand drawn sign details will not be accepted. Renderings must specify style of sign, all dimensions, method of lighting, fabrication materials, colors, and details of text. For freestanding sign, a site plan shall also be provided accurately detailing the location of installation. For each sign that is proposed, a separate application shall be submitted. Separate Building Department application also required.

Fees: Application fee—\$100; Fee payable to "Town of Monroe." Before submitting the application, consult Article 20 of the Zoning Regulations for specific requirements regulating the design and placement of signs. Incomplete or inaccurate information will result in rejection of the application.

Answer each of the following items— DO NOT leave any item blank—Complete application by typing or legibly printing in ink.

The sign permit will be issued to the business identified below, regardless whether that entity is or is not the applicant. It is recommended that the business owner be the end user for the sign (i.e., business owner or operator, or similar responsible party).

PERMIT INFORMATION

Business Owners Name _____

Business Owners Address _____ Contact Phone _____

Name of Business to be Identified _____

Complete Address Where Sign Is To Be Installed _____

Assessor's Property Identification Number (map/lot) _____ Zoning District _____

Applicant Name _____

Applicant Address _____ Day Phone _____

Is applicant sign fabricator/installer ☐ YES ☐ NO If "NO" provide name, address, & phone # of fabricator/installer: _____

SIGN INFORMATION (circle all which apply)

DESCRIBE TYPE OF SIGN PER DEFINITIONS IN ZONING REGULATIONS (Sec 2.2.1 Signs) _____

SIGN LOCATION ELEVATED FREESTANDING GROUND FREESTANDING ON STRUCTURE

IF SIGN IS FREESTANDING, SIGN IT IS: SINGLE SIDED DOUBLE SIDED

SIGN IS: NEW REPLACEMENT ALTERATION RELOCATION REPAIR

LIGHTING EXTERNAL LIGHTING INTERNAL LIGHTING NO LIGHTING

OUTSIDE DIMENSIONS OF SIGN _____ TOTAL SQUARE FOOTAGE _____

SIGN ELEVATION DIMENSIONS _____ feet to bottom of sign; _____ feet to top of sign; _____ to top – overall

SIGN IS PART OF APPROVED SHOPPING CENTER SIGN SCHEME ☐ YES ☐ NO

I hereby certify that I am making this application on behalf of and with the full authority of the owner of the property or premises and am aware of the Zoning Regulations pertinent to the application and that the statements and information provided are accurate and true. Further, the undersigned hereby authorizes the Town of Monroe and its agents, to access the premises during normal business hours or hours of construction for the purpose of inspection of improvements and enforcement of the Zoning Regulations.

Signature of Applicant _____ Date _____

