

# COMPREHENSIVE SIGN PERMIT APPLICATION

Name of Business: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Actual Address of the Project: \_\_\_\_\_

\_\_\_\_\_

Sign Contractor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Town of Dagsboro Business License #: \_\_\_\_\_

State of Delaware Business License # \_\_\_\_\_

Description, locations, and dimensions of signs requested:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Attachments ? \_\_\_\_\_ Yes \_\_\_\_\_ No

**\$1,000.00 Fee – Payable to: TOWN OF DAGSBORO**

Review Process:

Code Enforcement Official: \_\_\_\_\_ Approved: \_\_\_\_\_ Rejected: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

Planning & Zoning Commission: \_\_\_\_\_ Approved: \_\_\_\_\_ Rejected: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

Town Council: \_\_\_\_\_ Approved: \_\_\_\_\_ Rejected: \_\_\_\_\_

Date: \_\_\_\_\_

Comments: \_\_\_\_\_

