



Town of Tappahannock

P. O. Box 266

Tappahannock, VA 22560

Phone: (804) 443-3336

Fax: (804) 443-1051

Permit # _____

Tax ID # _____

Fee Amount: _____

Receipt # _____

Date Received: _____

SIGN PERMIT

Name of **Property Owner**: _____

Name of **Applicant** Applying for Permit: _____

Mailing Address of Applicant: _____

Telephone Number Home/Work/Cell: _____

E-mail Address: _____

Physical Address of Proposed Sign(s):

What is the Existing Zoning: _____

Is Property Located in Historic Overlay Zone? Yes / No

Note: Signs located in Historic Overlay Zoning Permits (Section 22-239 d. 14) are required to be reviewed and approved by the Planning Commission in accordance with Section 22-241.

Contractor: _____ Phone Number: _____

Address: _____

Description of Sign: Reference Article XVI of the Zoning Ordinance for signage requirements:

Attach drawings to permit application showing the following:

- Number of existing sign(s) on property
- Total square footage of existing sign(s)
- Location of proposed sign(s) on the building or proposed freestanding sign on property – attach map with location marked to confirm setback and sight distance compliance
- The dimensions, total square footage, and shape of proposed sign(s)
- Electronic drawings of sign(s) are illuminated
- Linear feet of building footage or road frontage (Freestanding Sign)
- Description of work

I hereby certify that I have the authority to make the foregoing application, that the information given is correct and that the construction will conform with the regulations in the Building Code, Zoning Ordinances, and private building restrictions, if any, which may be imposed upon the above property by deed.

Signature of owner or authorized agent _____ Date _____

Address _____

Telephone Number _____

OFFICE USE ONLY

_____ **APPROVED** under provisions of Article _____ SEC. _____ Paragraph _____,
Zoning Ordinance adopted _____.

_____ **REJECTED** under provisions of Article _____ SEC. _____ Paragraph _____,
Zoning Ordinance adopted _____.

Administrator or Agent

Date

This permit shall expire and may be revoked if work has not begun within one (1) year or been substantially completed within two and a one half (2 ½) years from the date of issuance.

NOTE: ALL FREESTANDING SIGNS WILL BE FORWARDED TO THE ESSEX COUNTY BUILDING OFFICIAL FOR REVIEW AND APPROVAL.

I, or we, hereby covenant to restore any and all damages to sidewalks, streets, alleys, sewers, gas mains, water mains, and electric installations which may result.

OWNER _____

BUILDER _____