

Town of McAdenville Sign Permit Application

Town Hall 163 Main Street
PO Box 9 McAdenville, NC 28101
Phone: 704-824-3190
Web Address: www.townofmcadenville.org

Applicant Information

Applicant: _____ Contact Person: _____
Address: _____ Phone #: (____) _____
Email: _____

Sign Contractor

Company Name: _____ Contact Person: _____
Address: _____ Phone #: (____) _____

Lot Information

Property Location: _____ Parcel #: _____ Zoning District: _____
Owner: _____ Phone #: (____) _____
Address: _____

Flood Zone: Yes No City Water: Yes No City Sewer: Yes No

Name of Business: _____

Sign Information

FREESTANDING SIGNS		Type of Sign: Ground - Pole - Menu Board - Sandwich Board [CIRCLE]	
Directory: Y or N Multi-tenant: Y or N	Total New Sign Area: Height _____ x Width _____ = Area _____ Sq.ft.		
Total height to top of sign: _____ ft.		Ground Clearance under sign: _____ ft.	
Is the sign below grade at street level?: Y or N How many feet? _____		Street sign is fronting: _____	
Distance behind Right-Of-Way line: _____ ft. Side Setback: _____ ft. In sight distance triangle?: Y or N			

BUILDING SIGNS		Type of Sign: Wall - AWNING - Menu Board - Projecting [CIRCLE]	
Directory: Y or N	Total New Sign Area: Height _____ x Width _____ = Area _____ Sq.ft.		
WALL	Area of building wall: Height _____ x Width _____ = Area _____ Sq.ft.		
PROJECTING	Projection from the building: _____ ft. Ground clearance under sign: _____ ft.		

Lighted: **Y** or **N** Illuminated: **Internal - External** Lighting Details: _____

Other than the new sign, number of existing signs on the property: _____
Total square footage of freestanding signs on premises: _____ ft. Building signs: _____ ft.
Attach dimensional and location information of any other signs to this permit

Attach the following

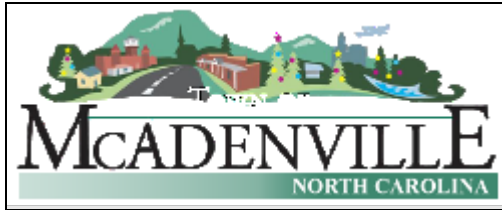
For free-standing and ground signs, 1 copy of a scaled dimensional drawing showing all property lines, right-of-way lines, and the exact shape and dimensions of the lot on which the sign is to be located. On this drawing the applicant shall sketch the proposed location of the sign, along with dimensions of sign and support structure.

I hereby certify that all of the information provided for this application and all attachments are true and correct to the best of my knowledge. I further certify that I am familiar with all the requirements of the Unified Development Ordinance (UDO) concerning this proposed use. Any violation of the UDO will be grounds for revoking this permit and any subsequent permit issued by the Town of McAdenville. Zoning Permits expire if work or construction is not begun within 6 months.

APPLICANT SIGNATURE: _____ **DATE:** _____

RECEIVED BY: _____ **DATE:** _____

FEE: _____ **PAID:** _____



Town of McAdenville Sign Permit

OFFICIAL USE ONLY

Approved: _____ Denied: _____

Address: _____ Parcel: _____

Permit Type: _____

Details: _____

Applicant: _____

Zoning Administrator: _____

It is hereby certified that the above use as shown on the plats and plans submitted with the application conforms with all the applicable provisions of the Town of McAdenville Unified Development Ordinance (UDO). The issuance of this Permit does not allow the violation of the UDO or other governing regulations. The applicant is responsible for obtaining a Gaston County building permit (if required) prior to commencing work on the proposed improvement. A final zoning inspection must be scheduled by the applicant.

Zoning Permit: _____

Date Issued: _____

Expiration Date: _____

Reason/Conditions: _____

