

Sign Permit Application

520 E. Cascade Avenue | PO Box 39 - Sisters, Or 97759 | ph. (541) 549-6022 | www.ci.sisters.or.us



Permanent Special Event Temporary (20 S.F. Maximum)

Ownership and Applicant Information

Applicant / Owner Name(s) _____ Phone _____

Address _____ Email _____

Designer / Installer _____ Phone _____

Address _____ Email _____

Property Information

T _____ R _____ S _____ Tax Lot(s) _____ Zone _____

Property Address _____ Establishment Name _____

Sign Type

- Wall ----- Size _____ X _____ Façade Dimensions _____ X _____
- Additional Wall ----- Size _____ X _____ Façade Dimensions _____ X _____
- Existing wall signs on the same façade - Size _____ X _____ Clearance _____ Height _____
- Freestanding ----- Size _____ X _____ Height _____ **ONE PER FRONTAGE**
- Projecting/Hanging ----- Size _____ X _____ Clearance _____
- Awning/Canopy ----- Size _____ X _____ Clearance _____
- Other, Please describe _____

BEFORE APPLICATION IS ACCEPTED – PLEASE READ THE FOLLOWING:

Please do not order any signs until all approvals have been met. Building permits are required for all signs.

- You must include a scale drawing of the sign, placement of sign (plot plan and elevation of the building), sign lettering, sign colors, construction materials and any lighting proposed. Please add length of building walls and height (based on code). Please include all types of hardware being used to ATTACH the sign to the building, etc.
- This approval does not authorize signs that are not permitted under applicable CCRs or other private regulation of the property. You should check all applicable CCRs or other regulations before applying for your sign permit.

Owner / Applicant Signature _____ Date _____

City Approval _____ Date _____

School District Approval (if required) _____ Date _____

Building Department (if required) _____ Date _____

For Office Use Only

Date Received: _____ Date App COMPLETE: _____ Fee Paid: _____ File #: _____

Rec'd by: _____ Deemed COMPLETE by: _____ Receipt #: _____