



SIGN PERMIT APPLICATION
SP - _____ - _____

(512) 398-3461 • FAX (512) 398-3833
P.O. Box 239 • Lockhart, Texas 78644
308 West San Antonio Street

CONTRACTOR/OWNER

CONTRACTOR NAME _____ LICENSE NO. _____

DAY-TIME TELEPHONE _____ ADDRESS _____

FAX _____

OWNER NAME _____ ADDRESS _____

DAY-TIME TELEPHONE _____

PROPERTY

ADDRESS OR GENERAL LOCATION _____

ZONING CLASSIFICATION _____ HISTORIC LANDMARK OR DISTRICT (Y/N) _____

NUMBER OF STREET FRONTAGES (Property lines abutting a public street) _____

PRINCIPAL USE OF LAND AND/OR BUILDINGS ON THE SITE _____

NAME OF BUSINESS TO OWN OR USE PROPOSED SIGN _____

REQUESTED PERMIT

PROPOSED CONSTRUCTION (Check all that apply) _____ ON-PREMISE _____ OFF-PREMISE

_____ NEW SIGN _____ STRUCTURAL REPAIR _____ STRUCTURAL ALTERATION/RELOCATION

TYPE OF SIGN PROPOSED (Check all that apply) _____ WALL _____ MARQUEE

_____ LOW PROFILE _____ MEDIUM PROFILE _____ HIGH PROFILE

_____ INSTITUTIONAL _____ DEVELOPMENT ENTRANCE _____ RESIDENTIAL IDENTIFICATION

CHARACTERISTICS OF SIGN

IF ATTACHED SIGN, TOTAL AREA OF BUILDING FACADE ON WHICH LOCATED _____ SQ. FT.
IF FREESTANDING SIGN, SETBACK FROM NEAREST STREET RIGHT-OF-WAY LINE _____ FT.
HEIGHT TO TOP OF SIGN _____ FT. TOTAL SIGN FACE AREA (One side only) _____ SQ. FT.
ILLUMINATION _____ NONE _____ INTERNAL _____ REFLECTED _____ BARE BULB

SUBMITTAL REQUIREMENTS

DRAWING, PREFERABLY SUBMITTED ON PAPER NO LARGER THAN 11" X 17", SHOWING: 1) The location of the proposed sign on the site or building, including dimensioned references to adjacent building features or nearest property line, as appropriate; 2) Dimensions of the sign and sign structure, including foundation or mounting details; 3) Material and electrical specifications; 4) Name of sign manufacturer, if applicable; and, 5) If the sign is to be freestanding and over 20 feet high, certification by a licensed engineer for structural compliance with the building code.

LIST OF SIGN FACE AREA OF ALL EXISTING SIGNS, IF ANY, ON THE SAME BUILDING FACADE (for attached signs) OR ALONG EACH STREET FRONTAGE OF THE PROPERTY (for freestanding signs).

COPY OF STATE PERMIT OR AUTHORIZATION IF APPLICATION IS FOR AN OFF-PREMISE SIGN.

COMPLETED APPLICATION FOR A CERTIFICATE OF ALTERATION IF SIGN IS IN HISTORIC DISTRICT OR ON HISTORIC LANDMARK PROPERTY.

PERMIT FEE OF \$10.00, PLUS \$0.25 PER EACH SQUARE FOOT OF SIGN AREA OVER 40 SQUARE FEET, (applied to only one side of double-faced signs), PAYABLE TO THE CITY OF LOCKHART WHEN THE PERMIT IS ISSUED.

I HEREBY AFFIRM THAT IF I AM NOT OWNER OF THE PROPERTY UPON WHICH THE SIGN IS TO BE LOCATED, I AM AUTHORIZED BY THE PERSON, ORGANIZATION, OR BUSINESS ENTITY OWNING THE PROPERTY TO REPRESENT THEM IN THIS APPLICATION. TO THE BEST OF MY KNOWLEDGE, THIS APPLICATION AND ASSOCIATED DOCUMENTS ARE COMPLETE AND CORRECT.

SIGNATURE _____ DATE _____

PRINTED OR TYPED NAME _____

NOTE: All freestanding signs require a pre-pour foundation inspection to verify the location and reinforcement of the sign. It is the contractor's responsibility to call for the inspection.

OFFICE USE ONLY

APPROVED BY _____
Planning Building Inspection

PERMIT NUMBER SP - _____ - _____ CERT. FOR ALTERATION NUMBER CFA - _____ - _____

DATE _____ FEE _____ RECEIPT # _____