

SIGN PERMIT
Building Department
172 N 2nd St. Decatur, IN 46733
(260) 724-3814

Email: permits@cityofdecatur.in.gov

Permit: _____

Date: _____

LOCATION OF SIGN: _____

APPLICANT: _____

PHONE: _____

ADDRESS: _____

EMAIL: _____

OWNER (IF DIFFERENT THAN APPLICANT): _____

PHONE: _____

ADDRESS: _____

EMAIL: _____

SIZE AND TYPE OF SIGN: _____

ESTIMATED COST: _____

(1) ATTACH DRAWING OF SIGN, DIMENSIONS, POLE SIZE AND/OR FOUNDATION

(2) ATTACH PLOT PLAN SHOWING LOCATION OF SIGN, ALL PROPERTY LINES, EXISTING AND PROPOSED STRUCTURES, EASEMENTS AND DRIVEWAYS.

ELECTRICAL CONTRACTOR: _____

PHONE: _____

ADDRESS: _____

EMAIL: _____

NOTES: _____

PERMIT FEES:

ON-PREMISE FREE STANDING: \$100 _____

DIRECTIONAL/INFORMATIONAL: \$ 20 _____

WALL-MOUNTED-PRINCIPAL: \$100 _____

EACH ADDITIONAL: \$ 20 _____

OFF-PREMISE: \$500 _____

TOTAL: _____

THE APPLICANT CERTIFIES THAT ALL INFORMATION PROVIDED HEREIN IS ACCURATE AND TRUE, AND IN ACCORDANCE WITH THE PROVISIONS OF THE SIGN ORDINANCE OF THE CITY OF DECATUR

SIGNATURE: _____

DATE: _____

SIGNED: _____

DATE: _____

(BUILDING INSPECTOR)