

TOWN OF EASTHAM – SIGN REGISTRATION

FEE _____ DATE _____

Applicant name _____ Phone number _____

Mailing address _____

Location (street address) of proposed sign _____

Map _____ Parcel _____ Zoning district _____ Is business a franchise? Yes ___ No ___

Total sq ft area of sign (all sides) _____ Single or double faced _____

Is sign free standing? Yes ___ No ___ If yes, height at tallest point _____

Type and size of base _____ or, sign is a ladder sign (no base) Yes ___

Distance sign is set back from street _____ Distance set back from nearest side line _____

Is sign for a home occupation? Yes ___ No ___ Dimensions _____

Is sign attached to the building? Yes ___ No ___ Vertical distance to top of sign _____

Does sign project over walkway? Yes ___ No ___

Total number of signs existing at this location (excluding proposed) _____

Is this sign: Conforming? Yes ___ No ___ Pre-existing conforming? Yes ___ No ___

Non-conforming? Yes ___ No ___ Pre-existing non-conforming? Yes ___ No ___

Related appeals board case, if applicable _____

Please submit a plot plan showing the location of the proposed sign and a sketch or photo of the sign indicating color scheme

Signature of applicant _____

SIGN PERMIT

This is to certify a permit is hereby granted



Applicant _____ Location _____

Number _____

Issue Date _____

Thomas Wingard, Building Inspector

This permit expires if sign(s) are not installed within six months of issuance