



# PERMANENT SIGN PERMIT APPLICATION

Shelbyville Plan Commission  
44 West Washington Street  
Shelbyville, IN 46176  
P: 317.392.5102 F: 317.392.5110

**ALL INFORMATION MUST BE COMPLETED AND SIGNED BY THE OWNER OR CONTRACTOR OF THE SIGN.**

### 1. Sign Owner:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

### Contractor:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_

### 2. Location Information:

Address of Property: \_\_\_\_\_  
\_\_\_\_\_  
Zoning Classification: \_\_\_\_\_

Property Owner: \_\_\_\_\_  
Owner's Address \_\_\_\_\_  
\_\_\_\_\_  
Owner's Phone #: \_\_\_\_\_

### 3. Existing Sign Information:

Are there any current signs at the same location? \_\_\_\_\_  
Are you replacing any current signs? \_\_\_\_\_  
Addition Information: \_\_\_\_\_

### 4. Proposed Sign Information:

Type of Sign: \_\_\_\_\_ Illumination of sign: \_\_\_\_\_  
Square Footage of Sign: \_\_\_\_\_ Height of Sign: \_\_\_\_\_  
If Wall Sign; Building Frontage Dimensions: \_\_\_\_\_ If monument sign; Landscape details need to be included.

***For more than one sign please use back of application to provide same information on each sign.***

### 5. Required Supplemental Information:

The following information must be provided as elements of the Sign Permit Application:

- A drawing of the sign showing its dimensions and height
- A site plan showing where the sign will be placed on the property

**I certify that the information contained on this form is complete and accurate and the required supplemental information listed above has been provided.**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

*Office Use Only*

Application #: \_\_\_\_\_ Date Received: \_\_\_\_\_ Fee: \_\_\_\_\_ Released for Installation: Yes No