Planning and Development
4303 Lawrenceville Road
P.O. Box 39
Loganville,GA 30052
Tel: 770-466-2633
Email: planning@loganville-ga.gov

SIGN PERMIT APPLICATION

PERMIT # _____

Include the Following Attachments:

- ☐ Attach details for foundation, footings, materials, electrical and engineering calculations (if required)
- ☐ Drawing or rendering of proposed sign
- ☐ Written permission of property owner or management agent

***INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

SIGN LOCATION

Address _____ Business/Tenant/Name _____

Sign Owner's Name _____ Phone Number _____

Email Address _____

PROPERTY OWNER INFORMATION

Name _____ Phone Number_____

Address _____ City/State/ Zip _____

CONTRACTOR INFORMATION

Name _____ Business License # _____

Address _____ City/State/Zip _____

Contact Person _____ Phone Number _____

Email Address _____

SIGN INFORMATION

Type: ☐ Freestanding ☐ Building ☐ Freestanding 2 ☐ Banner

Gross Building or Tenant Space _____ sq. ft. **Sign Dimensions** _____ **Face Area** _____ sq. ft.

Value $ _____ **Height*** _____ ft. Display Period (banner) ___/___/_____ to ___/___/_____

Lighting: ☐ Internal ☐ External ☐ None **(*Lighted signs require Electrical Permit)**

Master Signage Plan: ☐ No ☐ Yes **Project Name** _____

APPLICANT'S CERTIFICATION

I HEREBY CERTIFY THAT I HAVE EXAMINED AND UNDERSTAND ALL INFORMATION IN THIS APPLICATION AND THAT THE ABOVE STATEMENTS AND INFORMATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. THE WORK TO BE PERFORMED SHALL COMPLY WITH ALL PROVISIONS OF APPLICABLE LAWS AND ORDINANCES WITH WHETHER SPECIFIED HEREIN OR NOT. FAILURE TO COMPLY OR FALSE STATEMENTS SHALL BE GROUNDS FOR REVOCATION OF PERMIT.

_____

Signature (Applicant is: Owner / Tenant / Contractor)

Sign Permit is: ☐ Approved ☐ Denied Reasons for Denial _____

_____

Approved by: _____ Date: _____ Permit Fee $_____