



Sign Permit Application

Instructions: Please complete the following form and allow two working days for the certification to be prepared. The fee for a sign permit is dependent on the request and must be submitted with your request. Please be sure to include the following:

- Site plan of property depicting where proposed sign is located, including setback from public right of way and all existing signs on site
Illustration of sign showing height, width, area, height above grade, materials, and lettering

Upload your completed form to;

https://unioncityga.portal.iworq.net/portalhome/unioncityga

Please make your payment online when submitting your application

https://unioncityga.governmentwindow.com/payer_login.html

Application is for a sign in: [] Residential area [] Non-Residential area

Name of Development/Business: _____

Applicant Name: _____

Location Address: _____

Tax Identification/ Parcel #: _____

The Sign is intended to be: [] Permanent [] Temporary

If Temporary, Erection Date: _____ End Date: _____

Type of sign (Bolded categories are Non-Residential only):

- [] Attention Getting Device [] Banner [] Billboard
[] Canopy
[] Flag [] Freestanding [] Light Pole Banners
[] Marquee [] Mural [] Out of Store Marketing Device
[] Pennant/Streamers [] Rear Entrance Wall [] Suspended
[] Wall [] Window

Sign Dimension: Height: _____ Width: _____ Area: _____

Estimated Costs of Sign: \$ _____

Existing Signs (of same type): [] Not Present [] Permanent (#) _____ [] Temporary (#) _____

Permit Fee: \$ _____ Building Plan Review Fee: \$ _____

Owner Name: _____
Phone #: _____ FAX #: _____
Email address: _____
Mailing Address: _____
Business Name: _____
Business Address: _____
Business Phone: _____ Business FAX: _____

Contractor Business Name: _____
Agent Name: _____
Mailing Address: _____
Business Phone: _____ Business FAX: _____
Email address: _____
Business License Number: _____ Issuing Authority: _____

I hereby certify that the site described herein will be constructed and/or used in accordance with all applicable zoning ordinances and laws governing the city of Union City.

Contractor/ Owner signature: _____ Date: _____

FOR OFFICE USE ONLY

Date Submitted: _____ **Accepted by:** _____

Fee Paid: _____ **Permit #: SP-** _____

Comments: _____
