



Permit # Date Received:
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## APPLICATION FOR ZONING/BUILDING PERMIT FOR SIGNS - GLOUCESTER COUNTY, VA

- I. Name of Applicant (Note: Must be INDIVIDUAL) (*please print*): \_\_\_\_\_  
 Company Name: \_\_\_\_\_  
 Applicant Mailing Address (include city, state, zip): \_\_\_\_\_  
 Contact Phone Number(s): \_\_\_\_\_ email: \_\_\_\_\_
- II. Name of Property Owner(s): \_\_\_\_\_  
 Mailing Address (include city, state, zip) \_\_\_\_\_  
 Contact Phone Number(s): \_\_\_\_\_ email: \_\_\_\_\_
- III. Property Information:  
 Street Address (E911): \_\_\_\_\_  
 Recorded Subdivision Name or Legal Description of Property: \_\_\_\_\_  
 RPC: \_\_\_\_\_ Tax Map # \_\_\_\_\_
- IV. Describe the current use of the property: \_\_\_\_\_
- V. Describe the type of signage proposed (including signs to be removed): \_\_\_\_\_  
 \_\_\_\_\_

FREESTANDING SIGNS:	ON-STRUCTURE SIGNS:
Number of <b>existing</b> freestanding signs on property/premises: _____	Number of <b>existing</b> signs on structure: _____
Total square footage of <b>existing</b> freestanding signs: _____ sq. ft.	Total square footage of <b>existing</b> signs on structure _____ sq. ft.
Number of <b>proposed</b> freestanding signs: _____	Number of <b>proposed</b> on-structure signs: _____
Total square footage of <b>proposed</b> freestanding sign(s): _____ sq. ft.	Total square footage of <b>proposed</b> on-structure sign(s): _____ sq. ft.
Is the <b>proposed</b> sign(s) internally illuminated? Yes No	Is the <b>proposed</b> sign(s) internally illuminated? Yes No
Total height of the <b>existing</b> sign(s) _____ feet Total height of <b>proposed</b> sign(s) _____ feet	Distance in linear feet of building frontage: _____
In the case where lettering appears on opposite parallel sides of the proposed sign, sides are _____ inches apart	Total <b>existing</b> on-structure sign's value \$ _____
Total <b>existing</b> freestanding sign's value \$ _____	Total <b>proposed</b> on-structure sign's value \$ _____
Total <b>proposed</b> freestanding sign's value \$ _____	
FREESTANDING SIGN FACE REPLACEMENTS:	ON-STRUCTURE SIGN FACE REPLACEMENTS:
Total number of freestanding signs to be <b>refaced</b> : _____	Total number of on-structure signs to be refaced: _____
Total square footage of <b>existing</b> freestanding sign area _____ sq. ft.	Total square footage of <b>existing</b> on-structure sign area _____ sq. ft.
Total square footage of <b>proposed</b> freestanding sign area _____ sq. ft.	Total square footage of <b>proposed</b> on-structure sign area _____ sq. ft.
Total <b>existing</b> freestanding sign's value \$ _____	Total existing on-structure sign's value \$ _____
Cost of face replacement of freestanding sign \$ _____	Cost of face replacement of on-structure sign \$ _____
OFF-PREMISES SIGNS: (PLEASE NOTE OFF-PREMISES SIGNS SHALL NOT BE LIGHTED)	
Number of <b>proposed</b> off-premises signs: _____	
Total square footage of <b>proposed</b> off-premises sign(s): _____ sq. ft. Cost of proposed sign(s) \$ _____	
Are there other signs on this property, including off-premises? If so, how many _____ and size _____ sq. ft. Off-premises? Yes No	
Are other off-premises signs located in Gloucester County for this business? If so, what location _____	
<b>Attach written permission from the property owner for proposed off-premises signs.</b>	

- VI. Attach plans **drawn to scale** showing the following:
- The dimensions, shape and color of the proposed signs.
  - Linear feet of building frontage, including sign location on frontage for on-structure signs.
  - Plat drawn to scale showing the proposed sign location for freestanding signs and landscaping details if applicable.
  - For new signs; detailed construction plans (call 804-693-2744 for requirements)

**NOTE: An "Outdoor Advertising" permit may be required from VDOT. Contact them at (804) 720-8087 for more information. It is the applicant's responsibility to ensure compliance with all applicable local, state and federal regulations required for the proposed use.**

VII. Contractor \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone: \_\_\_\_\_ State License # \_\_\_\_\_ Expiration Date \_\_\_\_\_

PRIVACY ACT STATEMENT: Information provided in this application will be used in the permit review process and is a matter of public record once the application is filed. Disclosure of the requested information is voluntary, but it may not be possible to evaluate the permit application or to issue a permit if the information requested is not provided.

CERTIFICATION: I am hereby applying for all permits typically issued by the County of Gloucester for the activities I have described herein. I agree to allow the duly authorized representatives of any regulatory or advisory agency to enter upon the premises of the project site at reasonable times to inspect and photograph site conditions, both in reviewing a proposal to issue a permit and after permit issuance to determine compliance with the permit. In addition, I certify that this document and all attachments were prepared under my direction or supervision and the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware of penalties pursuant to Section 15-10 for violation to the Gloucester County Zoning Ordinance for submitting false information.

\_\_\_\_\_  
 Applicant's Signature/Date

**Owners obtaining building permits and not listing a contractor please complete and sign property owners' affidavit below (notary not required)**

PROPERTY OWNERS' AFFIDAVIT

I, \_\_\_\_\_, of (address) \_\_\_\_\_  
 \_\_\_\_\_ affirm that I am the owner of a certain tract or parcel of land located at \_\_\_\_\_ and that I have applied for a building permit. I affirm that I am familiar with the prerequisites of Section 54.1-1111 of the Code of Virginia and I am not subject to licensure as a contractor or subcontractor.

\_\_\_\_\_  
 (Affiant signature)

Signed and acknowledged in the County of Gloucester, VA, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, in the presence of the undersigned witness.

\_\_\_\_\_  
 (Witness signature)

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RETURN TO: Planning & Zoning/Building Inspection P. O. Box 329, Gloucester, VA 23061 6489 Main Street  
 Telephone: Building Inspection: (804) 693-2744 Zoning: (804) 693-1224

Zoning Application Fee: **\$50.00**; Make check payable to *Gloucester County*; Payment is required with application and is NOT REFUNDABLE  
 Building Permit Fees will be calculated at time of issuance

**Please note: Ordinance allows a 30 day review period for zoning permit applications.**