

(Payable By Check or Money Order ONLY)

Erection.....
Alteration.....
Repair.....
Removal.....

City of Springfield, Massachusetts  
SIGN APPLICATION

Application for a Permit to Place or Maintain a Sign or other Advertising Device, or Marquee, that does not extend into or over a public way more than twelve (12) inches

**PRINT LEGIBLY**

Date.....

1. Business Name.....
2. Street Address.....
3. Owner's Name..... Address.....
4. Maker's Name..... Address.....
5. Erector's Name..... Address.....
6. Electrician's Name..... License No.....

**KIND OF SIGN**

7. Sign Will Be (Check One) Illuminated..... Non-Illuminated.....
8. Sign Will Be (Check One) Single-Sided..... Double-Sided..... Marquee.....
9. Will Sign Obstruct A Fire Escape, Window Or Door?    No    Yes    Projecting.....
10. Lower Edge Will Be.....Ft.....Ins. Above Public Way.    Roof.....
11. Upper Edge Will Be.....Ft.....Ins. Above Public Way.    Temporary.....
12. Height.....Ft..... Ins.    Width.....Ft..... Ins.    Wall.....
13. Total Face Area.....Sq.Ft.    Weight Of Sign.....Lbs.    Ground.....
14. Inner Edge Will Be.....Ins. From Building Or Pole.    Other.....
15. Outer Edge Will Be.....Ins. From Building Or Pole
16. Face Of Building Or Pole Is..... Ins. Back From The Street Line.
17. Sign Will Project.....Ins. Beyond The Street Line.
18. Sign Will Extend.....Ft.....Ins. Above Building Or Pole.
19. Material Sign Will Construct?    Frame..... Face.....
20. Will Sign Conform To The Massachusetts State Building Code?    No    Yes
21. Will The Sign Conform To The City Of Springfield Zoning Ordinance?    No     Yes

*The Undersigned Certifies That The Above Statements Are True To The Best Of Their Knowledge And Belief.*

.....  
Signature Of Owner/Agent                      Contact Phone Number

<b>FOR OFFICE USE ONLY:</b>
FEE \$.....
CK # .....
TOTAL AMOUNT ON CHECK \$.....

**\*\*Attach a Print-Out of Potential Sign to Application\*\***