

City of Danville

Community Development Planning Division

SIGN PERMIT APPLICATION

Job Address:			
SIGN C	ONTRACTO	OR INFORMATION	
Business Name:	_		
Contact Person:			
Address:			_
		VNER INFORMATION	
Contact Person:	_		
Address:			
City, State, ZIP:			
Phone:			
E-mail:			
GI	ENERAL IN	FORMATION	
Number of Existing Signs –	Wall:	Freestanding:	
Existing Sign Area in Square Feet	t – Wall:	Freestanding:	
Proposed Number of New Signs -	- Wall:	Freestanding:	
New Sign Area in Square Feet –	Wall:	Freestanding:	
Estimated Job Cost:			

^{***} The Planning Division will contact you to verify your permit fee once we receive your completed application and review it according to City standards. Please do not begin work until we issue the permit. For fastest service, please make sure your sign contractor registration and local business license are up to date. Please contact the Planning Division with any questions at (434) 799-5260 or <a href="mailto:planning-new-mailto:planning-ne

Job Address:					
	PROP	OSED SIGN INFO	RMATION		
Sign #1 Type:	Wall	Freestanding Banner		Reface	
Location: _		Building	Frontage:		
Dimensions:	Height:	Length:		Depth:	
Sign Message: _					
Sign #2 Type:	Wall	Freestanding	Banner	Reface	
Location: _		Building	Frontage:		
Dimensions:	Height:	Length:		Depth:	
Sign Message: _					
Sign #3 Type:	Wall	Freestanding	Banner	Reface	
Location: _		Building	Frontage:		
Dimensions:	Height:	Length:		Depth:	
Sign Message: _					
Sign #4 Type:	Wall		Banner	Reface	
Location: _		Building Frontage:			
Dimensions:	Height:	Length:		Depth:	
Sign Message: _					
Comments:					