



SIGN PERMIT APPLICATION

Permits and Inspections Division
Planning & Development Department
Bylaw Enforcement Division
The City of Victoria, #1 Centennial Square
Victoria, B.C. V8W 1P6
<http://city.victoria.bc.ca>

SIGN PERMIT #

Application must be completed in full. For information, or assistance completing this application, please contact the Permits and Inspections Division at (250) 361-0323 or by e-mail at cliffc@city.victoria.bc.ca You can mail your completed application to the above address. .

PART A: SIGN PERMIT APPLICATION

Location Address: _____

USE & OCCUPANCY OF PREMISES: _____

TYPE OF SIGN

<input type="checkbox"/> FASCIA	<input type="checkbox"/> NOTICE BOARD
<input type="checkbox"/> FREE STANDING	<input type="checkbox"/> COMBINATION
<input type="checkbox"/> PROJECTING	<input type="checkbox"/> TEMPORARY
<input type="checkbox"/> ON AN AWNING	<input type="checkbox"/> READOGRAPH
<input type="checkbox"/> CANOPY	<input type="checkbox"/> ROOF TOP
<input type="checkbox"/> SUSPENDED	
<input type="checkbox"/> ILLUMINATED Y / N	

DIMENSIONS OF SIGN(S):

(1) (2) (3) (4)

HEIGHT: _____

LENGTH: _____

AREA: _____

DOCUMENTATION REQUIRED

1. PLAN SHOWING LOCATION AND DIMENSIONS OF BUILDING AND STREET FRONTAGE AND LOCATION AND SIZE OF ALL EXISTING AND NEW PROPOSED SIGNS.
2. AN ILLUSTRATION OF THE PROPOSED SIGN(S) WHICH DETAILS MATERIALS, GRAPHICS, COLOURS AND DIMENSIONS.

BE ADVISED THAT FOR SIGNS WITHIN DEVELOPMENT PERMIT AREAS, APPROVAL OF THE ADVISORY DESIGN PANEL OR CITY COUNCIL MAY BE REQUIRED WITH A CONSEQUENT EXTENSION OF PROCESSING TIME. FOR SIGNS, WHICH ARE REQUIRED TO BE ELECTRICALLY LIT, AN ELECTRICAL PERMIT WILL ALSO BE REQUIRED.

TOTAL JOB VALUE: \$ _____ PERMIT FEES: \$ _____

THIS APPLICATION IS NOT A PERMIT AND DOES NOT AUTHORIZE THE COMMENCEMENT OF THIS WORK

PART B: OWNER/AUTHORIZED AGENT'S CONSENT

I, the undersigned, being the owner or authorized agent for the above property, hereby consents to this application.

Owner/Agent: (print name) _____

Address : _____ Postal Code: _____

Telephone Number: _____ Fax Number: _____

Owner/Authorized Agent Signature: _____

Date Signed: _____, 20____

See over..

PART C: APPLICANT'S DECLARATION

***** PLEASE READ AND SIGN THE DECLARATION BELOW *****

RE: SIGN PERMIT

I declare, by signing this document, which is attached to a copy of a sign permit issued to me, that I have read and understand the Sign Bylaw and Regulations and I agree that I will comply with the Sign Bylaw and its Regulations relating to my permit. I further declare that my sign is in conformance with the bylaw and I will remain responsible to ensure its conformance.

Applicant/Owner/Occupant:(print name) _____

Applicant/Owner/Occupant's Signature: _____

Date Signed: _____, 20____

IMPORTANT: *This information is being collected for the purpose of determining the applicant's eligibility for a Sign Permit in the City of Victoria pursuant to Bylaw(s). In providing this information, you have consented to its use for the above-mentioned purpose and declare that all the information provided herein is correct. This information may be shared with applicable City of Victoria departments and related agencies for the purpose of required inspections and approval of this permit application.*