



Martinsville
A CITY WITHOUT LIMITS

CITY OF MARTINSVILLE, VIRGINIA SIGN PERMIT APPLICATION

City of Martinsville Zoning Office • PO Box 1112 • 55 W. Church St. Room 217-B
Martinsville, VA 24114 • 276-403-5380 or 276-403-5169 office • 276-403-5381 fax
Email: trumley@ci.martinsville.va.us or wknox@ci.martinsville.va.us

A PERMIT WILL NOT BE ISSUED UNTIL A COMPLETE APPLICATION HAS BEEN SUBMITTED. DRAWINGS OF THE SIGN, DIMENSIONS AND ITS LOCATION ON THE BUILDING OR SITE MUST BE SUBMITTED WITH THIS APPLICATION. SIGN CONTRACTORS ARE RESPONSIBLE FOR OBTAINING THE SIGN PERMIT IF THEY ARE INSTALLING THE SIGN. PROOF OF INSURANCE, CONTRACTOR LICENSE AND BUSINESS LICENSE ARE REQUIRED. DO NOT BEGIN WORK UNTIL THE APPLICATION HAS BEEN APPROVED AND A PERMIT HAS BEEN ISSUED.

SIGN CONTRACTOR/APPLICANT INFORMATION

COMPANY NAME: _____ CONTACT NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____ Email: _____

PROPERTY OWNER INFORMATION

NAME: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____ Email: _____

SIGN LOCATION ADDRESS: _____

CURRENT ZONING: R-16 R-9 R-6 P-1 P-2 RP-1 C-1 C-2 C-3 C-1A B-1 M-1 M-2

IS THE PROPERTY LOCATED IN A HISTORIC DISTRICT? YES NO

SIGN INFORMATION

APPLICATION FOR PERMISSION TO: ERECT ALTER REPAIR REFACE REPAINT OTHER _____

TYPE OF SIGN: GROUND WALL PROJECTING MARQUEE ROOF TEMPORARY OTHER _____

SIGN DIMENSIONS: _____ ft. X _____ ft. TOTAL AREA OF SIGN (sq. ft.): _____ HEIGHT OF SIGN (ft.): _____

WILL SIGN BE ILLUMINATED? YES NO IF SO, BY WHAT MEANS? _____

SIGN MATERIALS: WOOD PLASTIC METAL NEON CLOTH BRICK MASONRY OTHER _____

WORDING OF SIGN: _____ LOGO? YES NO

EXPECTED COMPLETION DATE: _____ ESTIMATED COST OF SIGN: _____

WILL THE SIGN CONFORM TO THE ORDINANCES OF THE CITY OF MARTINSVILLE? YES NO

SETBACK INFORMATION (FOR NEW GROUND SIGNS ONLY)

DISTANCE SIGN WILL BE LOCATED (ft.):

IN THE FRONT, FROM THE STREET RIGHT-OF-WAY? _____

IN THE REAR, FROM THE REAR PROPERTY LINE? _____

ON THE RIGHT SIDE, FROM THE RIGHT PROPERTY LINE? _____

ON THE LEFT SIDE, FROM THE LEFT PROPERTY LINE? _____

FROM THE PRIMARY BUILDING? _____

FROM THE SIDEWALK/CURB? _____

DISTANCE SIGN WILL PROJECT ABOVE GRADE (ft.)? _____

WILL THE SIGN BE LOCATED IN THE CITY RIGHT-OF-WAY? YES NO

WILL THE SIGN OBSTRUCT VISION ALONG CITY RIGHT-OF-WAY? YES NO

WILL THE SIGN OBSTRUCT A FIRE ESCAPE, WINDOW OR DOOR? YES NO

APPLICANT CERTIFICATION

By signing below, I certify that the information on this application is true to the best of my knowledge.

APPLICANT SIGNATURE

DATE

PROPERTY OWNER CERTIFICATION

By signing below, I certify that I am aware of this sign permit application and I consent to the installation of the sign as described on this application.

PROPERTY OWNER SIGNATURE

DATE

FOR OFFICE USE ONLY

DOES THIS APPLICATION MEET ALL THE REQUIREMENTS AND REGULATIONS OF THE CITY OF MARTINSVILLE ZONING ORDINANCE? YES NO IF NO, WHICH SECTION(S) IS IN VIOLATION?

DOES THIS APPLICATION REQUIRE ARB APPROVAL? YES NO ARB: APPROVED DENIED

DRAWINGS ATTACHED? YES NO RIGHT-OF-WAY MARKED? YES NO N/A

PROOF OF CONTRACTOR LICENSE, BUSINESS LICENSE AND GENERAL LIABILITY INSURANCE? YES NO N/A

APPLICATION IS: APPROVED DENIED

FEE AMOUNT: _____ PAID BY: CASH CHECK

ZONING ADMINISTRATOR SIGNATURE

DATE