



For Office Use

Date Submitted: _____

Fee: _____

Town of Cheshire Department of Planning and Development

APPLICATION FOR SIGN PERMIT REVIEW

APPLICANT INFORMATION

Name: _____

Title: _____ Company: _____

Address: _____

City/State: _____ Zip Code: _____

Telephone: _____ Email: _____

AGENT FOR APPLICANT

Name: _____

Company: _____

Address: _____

City/State: _____

Zip Code _____

Telephone: _____

Email: _____

Specify Nature of Agent

- ☐ Attorney
☐ Civil Engineer
☐ Land surveyor
☐ Architect
☐ Other: _____

PROPERTY OWNER(S) AND INFORMATION

Note: If property owner is a LLC, Corporation, trust, or other legal entity, attach the names, addresses, and title of each member or officer, including agent(s). if same as applicant list Applicant must submit evidence attesting to authority to file application (i.e., deed, option for purchase, etc.)

Name: _____

Address: _____

City/State: _____

Zip Code _____ Telephone: _____

Email: _____



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SIGN(S) TYPE AND SIZE

Applicant is proposing to install the following type(s) of signs at the subject property, check all that apply:

☐ Free-Standing

☐ Wall Mounted

Total number of signs proposed: _____

Total area of sign(s): _____ square feet

Dimension of sign(s) – Note: All measurements are to be feet. Totals are to be in square feet

Sign (1)

height	width	Total Area

Sign (2)

height	width	Total Area

Sign (3)

height	width	Total Area

Sign (4)

height	width	Total Area

Wall Mounted Signs cannot exceed 5% of the wall or unit area of which they will be attached.

Allowable area based on wall Area:

height	width	Total area
	Total area x .05 =	



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SIGN(S) DESIGN INFORMATION

Color(s) to be used: _____

Describe the materials that will be used for the proposed sign: _____

Will sign be illuminated? ☐ No ☐ Yes, If so how (Internal, ground, etc.): _____

LOCATION OF SIGN(S)

Applicant is to provide site plan and/or building elevations which are drawn to scale to illustrate the location for the proposed signage.

Please note: *Applications that do not include supporting documentation concerning location of proposed signage will be considered incomplete and will be denied.*



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ACKNOWLEDGEMENT OF APPLICANT/PROPERTY OWNER

Application Content

The undersigned hereby acknowledges that this application and statements submitted herewith are true to the best of my knowledge and approval of the application is contingent upon compliance with all requirements of said regulations.

Right of Entry and Inspection

The undersigned hereby authorizes the Cheshire Planning and Zoning Commission or its agents, to enter the subject property for the purposes of inspection and enforcement for the said Zoning Regulations until receipt of final Certificate of Occupancy and/or Certificate of Zoning Compliance.

Electronic Data Accuracy and Transmission

If applicable, the undersigned hereby acknowledges that all electronic data submitted as part of this application is an accurate and true representation of all paper transmissions provided as part of this application and may be transmitted publicly when requested and all applicable fees are paid in full by the requesting party.

Signature

Printed Name

Date

Applicant/Agent

Property Owner

Property Owner