



CITY OF ABILENE

# SIGN PERMIT APPLICATION

Questions? Please contact us:  
Development Services Center  
Phone: (325) 676-6232 Fax: (325) 676-6288  
555 Walnut Street, Room 100 Abilene, TX 79601

STREET ADDRESS OF SIGN \_\_\_\_\_

NAME OF BUSINESS IF ON SITE \_\_\_\_\_

Application is hereby made to:

- Alter
- Erect
- Add to
- Repair

the following sign in accordance with the Zoning Ordinance, International Building Code, Electrical Code, and other applicable ordinance of the City of Abilene.

Date: \_\_\_\_\_ Sign Value: \_\_\_\_\_

Receipt # \_\_\_\_\_ Fee: \_\_\_\_\_  
(2% of sign value or min. \$200 - except off-site & portable)

Contractor: \_\_\_\_\_

Contractor's Phone #: \_\_\_\_\_

Contractor's Shop Address \_\_\_\_\_

### TYPE OF SIGN:

(If more than one, indicate the amount in the space provided)

\_\_\_\_ Wall (Interior)  
Refer to Box A

\_\_\_\_ Wall (Exterior)  
Refer to Box A

\_\_\_\_ Pole (on-site)  
Refer to Box B

\_\_\_\_ Monument  
Refer to Box C

\_\_\_\_ Neon  
Refer to Box A

\_\_\_\_ Channel Letters  
Refer to Box A

\_\_\_\_ Off-site (Billboard)  
Refer to Box D

\_\_\_\_ Portable  
Refer to Box E

U.L. approved? Yes No -Internal electrical by Sign Electrician? Yes No

Electrical Contractor (new installation or modified): \_\_\_\_\_

### BOX A: WALL SIGNAGE, NEON, AND CHANNEL LETTERS

Height: \_\_\_\_\_ Length: \_\_\_\_\_ Sq. Ft: \_\_\_\_\_

Building Façade Sq. Ft. (if exterior): \_\_\_\_\_

Sq. Ft. of all other signs on same façade \_\_\_\_\_

### BOX B: ON-SITE POLE SIGNAGE

Dimensions of sign face: Height: \_\_\_\_\_ Length: \_\_\_\_\_ Area: \_\_\_\_\_

Overall Height: \_\_\_\_\_ Clearance to grade: \_\_\_\_\_

Proposed Setbacks: Front: \_\_\_\_\_ Ext. Side: \_\_\_\_\_ Int. Side: \_\_\_\_\_

#### Staff Use Only

Parkway Widths: Front: \_\_\_\_\_ Ext. Side: \_\_\_\_\_ setback from  
(Minimums from curb): ( ) ( ) side P.L.( )

### BOX C: MONUMENT SIGNS

Dimensions: Height: \_\_\_\_\_ Length: \_\_\_\_\_ Area: \_\_\_\_\_

Proposed Setbacks: Front: \_\_\_\_\_ Ext. Side: \_\_\_\_\_ Int. Side: \_\_\_\_\_

#### Staff Use Only

Parkway Widths: Front: \_\_\_\_\_ Ext. Side: \_\_\_\_\_ setback from  
(Minimums from curb): ( ) ( ) side P.L.( )

#### Staff Use Only

Zoning: \_\_\_\_\_

Flood Zone: Yes No

Floodway Development  
Permit Required?  
Yes No

**BOX D: OFF-SITE SIGNAGE**

(2% of sign value or min. \$500)

Dimensions of sign face: Height:\_\_\_\_\_ Length:\_\_\_\_\_ Area:\_\_\_\_\_

Overall Height:\_\_\_\_\_ Clearance to grade:\_\_\_\_\_

Distance from other off-site signage:\_\_\_\_\_

Proposed Setbacks: Front:\_\_\_\_\_ Ext. Side:\_\_\_\_\_ Int. Side:\_\_\_\_\_

**Staff Use Only**

Parkway Widths: Front:\_\_\_\_\_ Ext. Side:\_\_\_\_\_ **setback** from  
(Minimums from curb): ( ) ( ) side P.L.( )

**BOX E:**

**PORTABLE SIGNS**

(\$50)

Dimensions:

Height:\_\_\_\_\_

Length:\_\_\_\_\_

Electrical? Yes No

If yes: a Ground Fault Interrupter will be required

**Staff Use Only**

Parkway Widths:  
(Mins from curb):

Front:\_\_\_\_\_  
Min: ( )

Ext. Side:\_\_\_\_\_  
Min: ( )

**\*\*\*REQUIRED ATTACHMENTS\*\*\***

**ALL SIGNS:** Sketch showing all dimensions and structural details of proposed sign

**ALL FREESTANDING SIGNS:** Site Plan showing exact location of sign with dimensions from all nearby property lines. All setbacks and dimensions shall be measured to the outermost edge of the sign.

**ALL EXTERIOR WALL SIGNS:** Sketch showing square footage of proposed sign and building façade

**\*\*\*REQUIRED INSPECTIONS\*\*\***

1. **Foundation/piers must be inspected** for depth and steel before pouring concrete for all freestanding signs. **Electrical inspection is required** if electrical is in foundation and for all electrical wall signage. **A separate electrical permit is required for all electrical signs.**
2. **A final inspection is required for both the electrical work and the sign.**

The information submitted on this application is true and correct. Acknowledgement below indicates knowledge of zoning, electrical, and building requirements and assures compliance.

\_\_\_\_\_  
Signature of Contractor/Contractor's Representative (or Business Owner if applicable)

**APPROVALS:**

Zoning:\_\_\_\_\_ Date:\_\_\_\_\_

Engineering (if applicable):\_\_\_\_\_ Date:\_\_\_\_\_

Building Inspection:\_\_\_\_\_ Date:\_\_\_\_\_

Notes: