

City of Galax
SIGN PERMIT APPLICATION

Zoning Administrator, City of Galax, 111 E. Grayson Street, Galax, VA 24333 --- Telephone 276-601-3600

Property Owner Information

Property Owner: _____

Address: _____

Telephone Number: _____ Email Address: _____

Application Information for Contractor and Owner's Agent

Applicant or Owners Agent Name: _____

Company or Organization Name: _____

Address: _____

Telephone Number: _____ Email Address: _____

Contractor Name: _____

Address: _____

Telephone Number: _____ Email Address: _____

Contractor License Number: _____ Class A, B, or C: _____ Designations: _____

Contractor Galax Business License Account YES [] NO []

Sign Permit Information

Sign Permit Type: Temporary Sign [] New Sign [] Reface Sign [] Relocate Sign []

Sign Property Address: _____

Enterprise Zone: YES [] NO [] Downtown Tax District: YES [] NO []

Sign Construction Information

Number of Signs: _____ Surface Area of Each Sign: 1. _____, 2. _____ and 3. _____

Property Street Frontage Length: _____ Building Setback from Street: _____

Sign Support Construction: Free Standing [] Attached to Building [] Other: _____

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Please provide a brief general description of the sign work to be performed.

Estimated Total Labor, Material and Equipment Project Cost \$ _____

Sign Construction Details and Drawings

Provide attachments of a sketch(s) or drawing(s) of the sign and site plan on separate pieces of paper, as necessary, to provide the following minimum details.

1. Indicate the sign surface area (Only one display face shall be used to calculate the area, where sign faces are arranged to be viewed one at a time.)
2. Sign length and width measurements
3. General sign design, color, lighting, materials and structural details as necessary
4. Site plan showing building(s) with street setback dimension and sign location

I hereby certify that the sign application information above and permit application attachments are true and correct to the best of my knowledge and that all construction shall comply with the Virginia USBC and Galax City Code.

Printed Name	Applicant Signature	Date

City Staff Code Compliance Review

Zoning: Compliance with zoning regulations, setbacks, intended use and other Code issues.

Zoning Administrator, Daniel C. Riegel		Approved []
276-601-3600 _____	_____	Not Approved []
Signature of Zoning Administrator	Date	

Building Official: Compliance with VA Construction Code.

Building Official, Terry Atwell		Approved []
276-236-7297 _____	_____	Not Approved []
Signature of Building Official	Date	