



SIGN APPLICATION

Community Development Department, Planning Division
 1666 North Main Street, P.O. Box 8039
 Walnut Creek, CA 94596
 (925) 256-3558 information (925) 256-3500 fax
www.walnut-creek.org website

*For Staff Use Only
(Date Stamp)*

Sign Review # _____
 Work Order #: _____
 Parcel Map #: _____
 Total Deposit/Fee: \$ _____
 Receipt #: _____
 Received By: _____

APPLICANT: PLEASE PRINT CLEARLY AND FILL IN ALL APPLICABLE SECTIONS

I. Site Information

Business Name: _____ Business Address/Sign Location: _____
 Nature of business or use of sign(s): _____
 Ground floor area of business: _____ sq. ft.
 Ground floor principal frontage of business/tenant space: _____ ft.
 Area of property: _____ sq. ft. Sign Program: Yes No

II. Sign Information

Sign area of all existing signs to remain: _____ sq. ft. _____ sq. ft. _____ sq. ft. _____ sq. ft.
 Total sign area of proposed and existing signs to remain on principal frontage: _____ sq. ft.
 Sign area on each other frontage: _____ sq. ft. _____ sq. ft. _____ sq. ft.
 Type and number of proposed signs:
 Wall/Fascia _____ Freestanding/Monument: _____ Blade: _____ Awning Copy: _____
 Illumination: Internal Neon/Fluorescent Indirect Spot/Flood Lights Halo/Backlit None

III. Complete the following as it relates to each proposed sign:

Sign #	Dimensions		Mounting or Support	Type, spacing & specs	Material
	Vertical	Horizontal			

PROPERTY OWNER OR AGENT AUTHORIZATION:

NAME: _____
 COMPANY: _____
 ADDRESS: _____
 CITY, STATE: _____ ZIP: _____
 PHONE #: _____ FAX #: _____
 EMAIL: _____

CHOOSE ONE:

- I am the property owner and hereby authorize the filling of this application.
 I am the applicant and am authorized by the owner to file this application.

SIGNATURE: _____

DATE: _____