

CITY OF NEWPORT

Community Development Dept. 169 SW Coast Hwy Newport, OR 97365 (541) 574-0629 (541)574-0644 Fax

INSP: BuildingPermits.Oregon.gov or phone: 1-888-299-2821

SIGN PERMIT APPLICATION

Jo Na Fu Cit Ph Na Fu Cit Ph Cc Cc Na Fu Cit Ct Ct Cc	bb Information (where work is taking place) bb Site Address: ame of Property Owner: ty/State/Zip: bone #:Email: bplicant Information (person/co who will be permit holder) ame of Applicant: ty/State/Zip: bone #:Email: bontractor Information (person/co performing the work) Check if same as Applicant ame of Contractor: ty/State/Zip: bone #:Email: ty/State/Zip: ty/State/Zip: bone #:Email: ty/State/Zip: bone #:Email: bone #:Email: Email:Email: But if ye is taking place)
Na Fu Cit Ph Na Fu Cit Ph CCC Cit Cit Cit Cit Cit Cit Cit Cit Cit	ame of Property Owner: Ill Mailing Address:
Fu Cit Ph Na Fu Cit Ph CCC Cit Ph CCC Cit CCC	ty/State/Zip: ty/State/Zip: tone #:Email: splicant Information (person/co who will be permit holder) ame of Applicant: Ill Mailing Address: ty/State/Zip: shone #:Email: contractor Information (person/co performing the work) Check if same as Applicant ame of Contractor: Ill Mailing Address: ty/State/Zip: Email: Email: Email: Email: Email: Email: Email: Email: Email:
Citt Ph Na Fu Cit Ph Cc Cc Cit Cc	ty/State/Zip:Email:Email:Email:
Phh App Na Fu Cit Ph Ccc Cit Ccc Na Fu Cit Ccc Cit Ccc Ccc Ccc Ccc Ccc Ccc Ccc Ccc Ccc Cc	pplicant Information (person/co who will be permit holder) ame of Applicant: ty/State/Zip: pontractor Information (person/co performing the work) Check if same as Applicant ame of Contractor: ty/State/Zip: Email: ty/State/Zip: Email: Email: Email: Email: Email:
Na Fu Cit Ph CC Cit Cc Cc Cit Cc Cit	pplicant Information (person/co who will be permit holder) ame of Applicant: Ill Mailing Address: ty/State/Zip: pone #:Email: contractor Information (person/co performing the work) Check if same as Applicant ame of Contractor: Ill Mailing Address: ty/State/Zip: Email: Email: Email: Email:
Na Fu Cit Cc Na Fu Cit Cc Cc Cit Cc Cc Cit Cc Cc Cit Cc Cc Cit Cc Cc Cit Cc Cc Cit Cc Cc Cit Cc Cc Cit Cc C	ame of Applicant: Ill Mailing Address:
Fu Cit Ph CCC Cit CCC Na Fu Cit CCC CCC	ty/State/Zip: Email: contractor Information (person/co performing the work) Check if same as Applicant ame of Contractor: III Mailing Address: ty/State/Zip: Email: Email:
Cittle Photo Control C	ty/State/Zip:Email:Email: contractor Information (person/co performing the work) Check if same as Applicant ame of Contractor: ame of Contractor: ty/State/Zip: Email: Email:
Phh Na Fu Cit Ph CCC Cit Na Fu Cit	contractor Information (person/co performing the work) Check if same as Applicant ame of Contractor: Ill Mailing Address: ty/State/Zip: Email:
Na Fu Cit CC Cc Cit Cc Cit Cc Cc Cc Cit Cc Cc Cc Cit Cc Cc Cc Cc Cit Cc	contractor Information (person/co performing the work) Check if same as Applicant ame of Contractor: Ill Mailing Address: ty/State/Zip: Email: Email:
Na Fu Cit Ph CC Cit Ca Na Fu Cit	Check if same as Applicant ame of Contractor:
Na Fu Cit Cc Na Fu Cit	ame of Contractor: ill Mailing Address: ty/State/Zip:Email:
Fu Citt Phh CCC Citt Cat Na Fu Citt	ıll Mailing Address:ty/State/Zip:Email:
Cit Ph CC Cit Cc Na Fu	ty/State/Zip:Email:
Ph CC Cit Cc Na Fu Cit	none #: Email:
CCC Cit Ccc Na Fu Cit	
Cit Na Fu Cit	CB # (reg'd):
Na Fu Cit	
Na Fu Cit	ty Business Lic. (req'd):
Fu Cit	ontact Information (person who can provide project info
Cit	ame of Point of Contact:
	ıll Mailing Address:
Ph	ty/State/Zip:
	none #:Email:
Fa	x #:
. Fu	all Description of Work Proposed:
То	be completed by Applicant: PROPOSED SIGN INFORMATION

Erect Alter or Enl Paint		pply) Relocate on Sit Structural Face Remove for Re	e Change			
Office Use On Permit #:	ıy					
	Analianhla	Vaa	N			
	Applicable?	Yes	No			
Parent #:						
7. Proposed Sig Total height Above	i	of sign:				
Sign Length	Sign Length (feet & inches):					
Sign Height	(feet & inches)):				
Face of sign	in square feet	:				
Constructio	n materials:					
	Electrical permit required? Yes No Type of illumination:					
,·		(req'd for review)	•			
			ss?YesNo			
		below for each sig				
Sign #		in Sq Ft	Type of Sign (ex. Wall, roof, etc.)			
& correct. All procomplied with whe Copyright Releases can & post to the by me, my agents needed for admir	povisions of laws mether specified a e: I hereby gran internet, in who s, or representati histration of the o	& ordinances gover herein or not. In permission to the le or part, drawings ves. This grant of po City's regulatory, add	e City of Newport to replicate, & all other materials submitted ermission extends to all copies ministrative, & legal functions, ent entities & members of the			
Authorized signat	ture:					
			Date:			
			or relocation of a sign, a fee narged for the initial permit			

- for a mural sign that exceeds the maximum permissible size for a wall sign in the same location. (Nonprofit organizations are exempt from the supplemental fee.)
- **2.** For the repair of an existing sign and/or its supporting structure, no fee.
- 3. For demolition or removal of an existing sign and/or its supporting structure, a fee of \$10.
- 4. For temporary signs placed in the right-of-way, a fee of \$33 per sign for the first sign & \$10 per sign for each add'l sign. (Nonprofit organizations are exempt from this fee.)
- 5. For portable signs placed in the right-of-way adjacent to applicant's business, a fee of \$33 per sign per application for the first sign & a fee of \$10 per sign for each add'l sign. Also, a fee for use of the right-of-way of \$25 per month per sign with a maximum of \$100 per calendar year shall be charged. (Nonprofit organizations are exempt from either fee in this section.)

or temporary signs, provide a list below of approximate locations of proposed signs. IF SIGNS ARE TO BE LOCATED IN PUBLIC RIGHTS-OF-WAY, ALSO PROVIDE PROOF OF LIABILITY INSURANCE FOR YOUR
BUSINESS OR ORGANIZATION.)
Drawings required to be submitted with application include:
1. One copy of Plot Plan & Civil Drawings – drawn to scale which includes the following:

- a. North arrow, scale, property lines with dimensions, setbacks from property lines, names of street frontages;
- b. Layout of buildings, driveways, sidewalks;
- c. Other applicable structures & features of the property;
- 2. One copy of all other applicable drawings, calculations, documents, & information;
- 3. Foundation plan for freestanding sign;
- 4. Complete sign sections;
- 5. Construction details (i.e. sign attachments, weight of sign, wall section);
- 6. Engineering for special condition expiration date of engineering stamp must be shown.

FOR SIGNS INVOLVING ANY STRUCTURAL WORK, A STRUCTURAL PERMIT IS ALSO REQUIRED.