

CITY OF SEWARD

SIGN PERMIT APPLICATION

Sign Address:				Zoning				Permit No.	
Legal	Lot No.	Block	Addition				Email		
1.	Owner:			Address:				Phone:	
2.	Contractor:			Address:				Phone:	
3.	Describe Work:	Construct		Alter		Relocate		Face Change	
4.	Type of Sign:	Pole		Wall / Marquee		Ground		Projecting	
5.	Location on Building	North Wall		South Wall		East Wall		West Wall	
Special Comments: Location on lot requires separate submittal of site plan for pole or ground signs. Site plan must show lot size, identify street frontage and Indicate site triangle if applicable.					NOTICE All work shall be done in accordance with Section 35 of the City of Seward Zoning Ordinance. I am the owner of record of the above property, or have entered a contract with the owner of record, to provide a sign for the above building/s. I understand that I, as the owner or his agent, must insure the following is completed:				
Site Information		Required	Provided		<ol style="list-style-type: none"> 1. I agree to hold and save the City of Seward harmless from any damages arising from defective construction or disrepair of said sign, or damages from any source arising from its erection, use of maintenance, and further agrees to assume all liability for damages from any cause as stated above. 2. Electrical connections and service lines will be installed by a qualified electrical contractor. 3. Barricades must be provided and maintained around the location until the sign is completely installed. 4. Should the demolition or the removal of existing sign be required, all debris and sign parts are subject to removal from the premises when work is complete each work day. 5. If during the course of demolition any damage is done to city sidewalks, alleys, streets or utilities, such damage shall be repaired at the contractors expense. 6. Streets and alleys that might be barricaded during the actual construction of the sign will be cleared of debris and opened to normal traffic when work is completed each work day. 				
Front Setback									
Rear Setback									
Side Setback									
Length									
Width									
Height off Ground									
Total Square Ft.									
Electrical									
Engineered Mounting									
Footings Required									
Sign Permit Fee									
Electrical Fee									
Valuation									
Permit Total			\$						
Application Accepted By			Date:		_____ Signature of Sign Contractor (Date)				
Approved By			Date		_____ Signature of Owner (Date)				
Final			Date						

When properly validated (in this space), this is your permit