



# CITY OF PHILOMATH

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[www.ci.philomath.or.us](http://www.ci.philomath.or.us)

## A P P L I C A T I O N

### SIGN PERMIT

**Application Fee: \$ 150**

**A SEPARATE SIGN PERMIT REQUIRED FOR EACH SIGN.  
ALL SECTIONS MUST BE COMPLETED. ATTACH ADDITIONAL SHEETS IF NECESSARY.  
REVIEW WILL BEGIN ONLY WHEN THE APPLICATION IS DETERMINED TO BE COMPLETE.**

#### PROPERTY OWNER(S) INFORMATION

Names(s): \_\_\_\_\_ Phone #1: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Phone #2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

#### APPLICANT INFORMATION

Names(s): \_\_\_\_\_ Phone #1: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Phone #2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

#### SIGN CONTRACTOR INFORMATION

Names(s): \_\_\_\_\_ Phone #1: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Phone #2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_  
CCB License #: \_\_\_\_\_

#### PROPERTY INFORMATION

Site Address: \_\_\_\_\_  
Assessor's Map & Tax Lot Number(s): \_\_\_\_\_  
Current use(s) of the property: \_\_\_\_\_  
Zone: \_\_\_\_\_

#### SIGN INFORMATION

Is this sign:  New  Remove/Repair  Other \_\_\_\_\_

Is this sign your:  Primary or  Secondary Sign

**PROPOSED SIGN INFORMATION** (structural permit not required)

Is this sign temporary?  No  Yes ➔ Install date: \_\_\_\_\_ Removal date: \_\_\_\_\_

Type:  Freestanding ( Monument or  Pole)  Projecting  Vertical  Wall  Moving/Message  
 Horizontal  Daily Display (in right of way)

Illumination:  No  Yes (requires electrical permit)

➔  External  Internal

Type of internal illumination \_\_\_\_\_

NITS (measure of brightness) \_\_\_\_\_

**SIGN DETAILS:**

|                                 |                                       |
|---------------------------------|---------------------------------------|
| Depth _____                     | Weight _____                          |
| Horizontal dimension (ft) _____ | Vertical dimension (ft) _____         |
| Sign Area (sq ft) _____         | # of Faces _____                      |
| Direction sign faces _____      | Thickness of sign _____               |
|                                 | Projection beyond property line _____ |

**PLACEMENT DETAILS:**

|   |  |
|---|--|
| Distance to curb _____                              | Distance to property line _____                        |
| Height to top of sign above grade (ft and in) _____ | Height to bottom of sign above grade (ft and in) _____ |
| Length of wall (ft and in) _____                    | Height of wall (ft and in) _____                       |
| Wall area (sq ft) _____                             | Area of sign as % of building face _____               |
| Property street frontage (lin ft) _____             | Perimeter of structure (lin ft) _____                  |

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SUBMITTAL CHECKLIST**

Submit following documents for review:

1. Site plan (2 copies)
  - a. Location of sign on site
  - b. Setback distance measurements
  - c. Structures and other existing sign locations
2. Sign sketch, including structural attachments.
3. Photographs (not required, but helpful).
4. Additional information may be requested by the Planning Official.

**Signature(s)**

Owner Signature

Date

Applicant Signature *(if different from owner)*

Date

*For Office Use Only*

Date Application Received: \_\_\_\_\_ Receipt Number: \_\_\_\_\_ By: \_\_\_\_\_

Internal File Number: \_\_\_\_\_ ePermitting File Number: \_\_\_\_\_

Planner Assigned: \_\_\_\_\_ Date Application Deemed Complete: \_\_\_\_\_

Planner Approval: \_\_\_\_\_

**CONDITIONALS OF APPROVAL:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_