COMMONWEALTH OF VIRGINIA COUNTY OF FLUVANNA SIGN PERMIT CHECKLIST

Please submit all that apply on an 8.5" x 11" (up to 11" x 17") sheets of paper:

- 1. C Signed Application with written authorization from owner on separate sheet (if applicable)
- 2. C Location Map (such as Tax Map page with property highlighted)
- 3. O Site Plan showing location of sign on property (Including sign's distance to property line or any roads and or right-of-ways)
- 4. \bigcirc Scaled Drawings of the Sign
- 5. Non-refundable \$155.00 filing fee payable to Fluvanna County.

GENERAL NOTES:

- 1) Signs may not be placed in public road right-of-ways without specific permission of VDOT.
- 2) If signs are not of those designated as "not illuminated" in sign ordinance, the illumination shall be property focused upon or directed at the sign to prevent glare on the surrounding area. Lighting must provide for shielding from adjacent prperties and any public road.
- 3) No sign may extend above the building line.
- 4) Specific requirements may be found in the Zoning Ordinance, Article 15, Sign Regulations.

COMMONWEALTH OF VIRGINIA COUNTY OF FLUVANNA SIGN PERMIT APPLICATION

| Owner of Record: | | | Applicant: | | | | | |
|--|--|--|---|----------|---------------|-------------|---------|--|
| Address | : | | Addres | s: | | | | |
| Phone: | Fax: | | Phone: | | | Fax: | | |
| - Email: | | | Email: | | | | | |
| - Sign Co | ontractor: | Note: If applicant is anyone other than the owner of | | | | | | |
| Address: | | | record, written authorization by the owner designating the applicant as the authorized agen for all matters | | | | | |
| Phone: Fax: | | | concerning the request shall be filed with this | | | | | |
| Email: | | | application. | | | | | |
| Tax Map and Parcel(s): | | | Physical Address of Parcel: | | | | | |
| Parcel Acreage: | | | Parcel Zoning: | | | | | |
| Propos | ed Sign Description: (Check One) | | | | | | | |
| | | | 🔿 Sale or Rental | | | | | |
| Home Occupation/Small Home Industry Monument | | | Subdivision Temporary | | | | | |
| | | | | | | | | |
| | Projecting/Roof | | ○ Window | | | | | |
| | ○ Public | | 🔿 Other (Desc | ribe) | | | | |
| Lighting | g/Illumination: Will the sign be lighted | l? 🔿 Ye | es 🔿 No 🛛 Is | proposed | d sign double | sided? 🔿 Ye | es 🔿 No | |
| If so, by what Method? | | | Wording of Sign: | | | | | |
| Sign Fac | e (area used for message): | Length | ft. X W | idth: | ft. = | sq. ft. | | |
| Sign Area (entire area including face, framing, Length molding, trim but not support structure): | | | ft. X W | idth: | ft. = | sq. ft. | | |
| Sign Heig | ght (As measured from ground level to topr | nost portior | n of sign): | feet | | | | |

This permit is for compliance with the zoning ordinance as related to design and size only. I understand that it is my responsibility to obtain any other required permits such as electrical or building permits. I certify that the statements made and information given on this application are true, full and correct to the best of my knowledge and belief and I agree to conform fully to all terms of any certificate or permit which may be issued by way of this application. I also understand that false information may result in the permit becoming null and void.

| Applicant Name (Please Print) | | Applicant Signature | | | | |
|-------------------------------|----------------|-----------------------|--|--|--|--|
| OFFICE USE ONLY | | | | | | |
| \$155 fee paid: | Date Received: | MSC: | | | | |
| Election District: | | Planning Area: | | | | |
| Approved Denied Date: | ! | Zoning Administrator: | | | | |

Fluvanna County Department of Planning & Community Development * Box 540 * Palmyra, VA 22963 * (434)591-1910 * Fax (434)591-1911