


## SIGN PERMIT APPLICATION

	<b>WASHOE COUNTY BUILDING &amp; SAFETY DEPARTMENT</b>	Phone: (775) 328-2020 Fax: (775) 328-6132
	<b>1001 EAST NINTH STREET</b>	
	<b>P O BOX 11130</b>	Website:
	<b>RENO NV 89520-0027</b>	<a href="http://www.washoecounty.us">www.washoecounty.us</a>

### GENERAL INFORMATION:

Job Address: \_\_\_\_\_  
Parcel No. \_\_\_\_\_ Project Valuation: \$ \_\_\_\_\_  
Allowable Area: \_\_\_\_\_ Existing Area: \_\_\_\_\_  
Proposed Area: \_\_\_\_\_ Remaining Area: \_\_\_\_\_  
Freestanding Sign Height: \_\_\_\_\_  
Electric: Yes \_\_\_\_\_ No \_\_\_\_\_ Circuit Qty: \_\_\_\_\_ New Service: Yes \_\_\_\_\_ No \_\_\_\_\_  
Special Use Permit: Yes \_\_\_\_\_ No \_\_\_\_\_ Variance: Yes \_\_\_\_\_ No \_\_\_\_\_ (copy should be attached)

### DESCRIPTION OF WORK:

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

### OWNER INFORMATION:

Owner's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

### DESIGN PROFESSIONALS:

Architect: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Engineer: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### CONTRACTOR INFORMATION:

Name: \_\_\_\_\_  
State License No. \_\_\_\_\_ Washoe County License No. \_\_\_\_\_

### CONTACT INFORMATION:

Person to contact regarding plans: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Cell: \_\_\_\_\_ E-mail: \_\_\_\_\_