



City of Kelso

Sign Permit Application

FOR OFFICE USE ONLY

Permit #:	Zoning:	RV:
-----------	---------	-----

Questions and applications can be directed to the following:

Building and Planning
203 S. Pacific Ave., Suite 208
Kelso, WA 98626

360.423.9922 (office)
360.423.6591 (fax)

PROJECT SITE INFORMATION

Address/Location:	Parcel #:
-------------------	-----------

PROPERTY OWNER

Business Name:	Contact Name		
Mailing/Billing Address:	City:	State:	Zip:
Phone:	Email:		

APPLICANT (If different from property owner listed above)

Business Name:	Contact Name		
Mailing/Billing Address:	City:	State:	Zip:
Phone:	Email:		

CONTRACTOR

Business Name:	Contact Name:		
Mailing/Billing Address:	City:	State:	Zip:
Phone:	Email:		

WA State License # (Not UBI#):	Expiration Date:
City of Kelso Business License # (Permit cannot be issued until one is obtained):	Expiration Date:

DETAILED PROJECT DESCRIPTION

PERMIT INFORMATION

Building Type – Check all that apply: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial	Project Valuation (Fair Market Value Labor + Materials): \$
---	--

PERMIT FEES ARE BASED ON PROJECT VALUATION – SEE MASTER FEE SCHEDULE

TYPE OF SIGN(S) – CHECK ALL THAT APPLY:

<input type="checkbox"/> Fascia/Wall Mounted Sign	Sign #1	_____	Sign #2	_____
1. Size of sign (square footage)	Sign #1	_____	Sign #2	_____
2. Length of wall to which sign is to be attached (in feet)	Sign #1	_____	Sign #2	_____
<input type="checkbox"/> Freestanding Sign	Sign #1	_____	Sign #2	_____
1. Size of sign – total of both sign faces (square footage)	Sign #1	_____	Sign #2	_____
2. Height of sign from ground (in feet)	Sign #1	_____	Sign #2	_____
<input type="checkbox"/> Projecting Sign	Sign #1	_____	Sign #2	_____
1. Size of sign – total of both sign faces (square footage)	Sign #1	_____	Sign #2	_____
2. Projection from building wall (in feet)	Sign #1	_____	Sign #2	_____
3. Clearance from bottom of sign to sidewalk/grade (in feet)	Sign #1	_____	Sign #2	_____

Continued on page 2



City of Kelso

Sign Permit Application

FOR OFFICE USE ONLY

Permit #:	Zoning:	RV:
-----------	---------	-----

Questions and applications can be directed to the following:

Building and Planning
203 S. Pacific Ave., Suite 208
Kelso, WA 98626

360.423.9922 (office)
360.423.6591 (fax)

<input type="checkbox"/> Freeway Sign		
1. Size of sign – total of both sign faces (square footage)	Sign #1 _____	Sign #2 _____
2. Height of sign from ground (in feet)	Sign #1 _____	Sign #2 _____
<input type="checkbox"/> Other Sign		
1. Size of sign (square footage)	Sign #1 _____	Sign #2 _____

SIGN PERMIT SUBMITTAL CHECKLIST	Provided
Two plans showing locations of proposed sign(s), and lineal feet of street frontage.	<input type="checkbox"/>
Two plans of the proposed sign with sign style, size, method of construction and materials used along with a scaled design. For projecting or fascia signs, a scaled drawing of the building elevation shall be included.	<input type="checkbox"/>
Type of sign, whether illuminated or nonilluminated.	<input type="checkbox"/>

PROPERTY OWNER OR AUTHORIZED AGENT

I hereby certify that I have read and examined this application and know the same to be true and correct, and I am authorized to apply for this permit.

Signature: _____ Printed Name: _____ Date: _____