



# TOWN OF SOUTHERN SHORES PLANNING AND CODE ENFORCEMENT

5375 N Virginia Dare Trl, Southern Shores, NC 27949  
(252) 261-2394 ext 4 tel (252) 255-0876 fax  
[www.southernshores-nc.gov](http://www.southernshores-nc.gov)

PERMIT# \_\_\_\_\_  
FEE \$ \_\_\_\_\_

## SIGN APPLICATION

DATE \_\_\_\_\_

PROPERTY OWNER \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TENANT NAME (IF DIFFERENT) \_\_\_\_\_

PROJECT ADDRESS \_\_\_\_\_ FLOOD ZONE \_\_\_\_\_  
SUBDIVISION \_\_\_\_\_ LOT \_\_\_\_\_ BLOCK \_\_\_\_\_ SECTION \_\_\_\_\_  
Pin# \_\_\_\_\_ PARCEL# \_\_\_\_\_

CONTRACTOR NAME \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

COST OF PROJECT: \$ \_\_\_\_\_

### DESCRIPTION OF PROPOSED SIGN (ATTACH DRAWINGS WITH MEASUREMENTS)

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

SIGN FEATURES:	<input type="checkbox"/> ILLUMINATED	<input type="checkbox"/> FREESTANDING SIGN
	<input type="checkbox"/> NON-ILLUMINATED	<input type="checkbox"/> WALL SIGN
	<input type="checkbox"/> TENANT SIGN	<input type="checkbox"/> TEMPORARY SIGN

I hereby certify that all information in this application is correct and all work will comply with the NC State Building Code and all other applicable State and Local Laws, Ordinances and Regulations. The Code Enforcement Department will be notified of any changes in the approved plans and specifications for the project permitted herein.

OWNER/AGENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_