

## City of Quinlan

Phone: (903) 356-3306 Fax: (903) 356-4267 105 W. Main St. Quinlan, Texas 75474

Sign Permit Application

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Building Permit Number:						Valuation:		
Project Name:						Square Foot:		
Project Address:						Height:		
Project Description:	☐ Monun	nent Sign	☐ Pole/Pylon S	ign		Zoning:		
Scope of Work:	□ Wall S	ign	☐ Other:		☐ Tempora	ry Sign (Dates:	to)	
Owner Information:								
Name:					Contact Person:			
Address:					•			
Phone Number	:		Fax Number:			Email:		
Engineer	1	Contact P	erson		Phone Num	her	Email	
	J	Contact	0.0011		THORIO TYUIT	1501	Z.maii	
Architect	Contact Person		Phone Number		Email			
	_							
Sign Contractor		Contact Pe	erson		Phone Numb	oer	Contractor License Number	
Electrical Contractor		Contact Pe	erson		Phone Numb	per	Contractor License Number	
	_							
Other Contact	J	Contact Pe	erson		Phone Numb	per	Contractor License Number	
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A permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. All permits require final inspection.								
A Final Inspection Must Be Requested Upon Completion Of the Sign.								
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.								
Signature of Applicant:						Date:		
OFFICE USE ONLY	Appro	vals are		n all dep	partments	prior to issu		
Public Works	Approved By:		Date:	Zoning	Approved By:		Date:	
Building Approved By: Date:				Total Fees:				
				Receipt #:				
Sign Permit Fee: Plan Review Fee:						Issued Date:		
Electrical Permit Fee:						BV Project #:		
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