

The City of Garden City, Georgia 100 Central Avenue, Garden City, Georgia 31405 Phone: 912.966.7777 Fax: 912.963.2735

## **SIGN PERMIT APPLICATION**

The undersigned, herein named, requests permission to erect a sign:

Type of Sign:		
Property Address: _ Property Owner: _		
Proposed use of Building: _		
Materials to be used:		
Height of Sign:		
Square Footage		
of Proposed Sign:		
Pin Listing: _ Zoning Classification: _		
am familiar with and understand the by all of same.	ordinance regarding the character of co	onstruction, electrical work, etc., and agree to abide
y an or same.		
		ree that I/we, in all respects, construct the work in
		bmitted, and filed in the Inspections Department, and
n compliance with all the laws and O	nces of the City of Garden City, Georg	्राव.
Name (Print)		y Name
Address	Phone N	umber
	Signature	е
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· · · · · · · · · · · · · · · · · · ·	OFFICE USE ONLY	****************
Plan Submitted:		ee: \$
Γhe Sign Permit is approved subject to etc.	Ordinances of the City of Garden City	referring to building construction, electrical work,
	n -11-	
	Building	Inspector / Code Enforcement Officer