

## **PLANNING & COMMUNITY DEVELOPMENT**

**Building & Inspections Division** 

Town of Ocean City

permits@oceancitymd.gov Ocean City, MD 21842 410-289-8855

## SIGN PERMIT APPLICATION

	L. C.						APPLICATION #		
I. Project Inform	nation								
Business Name	e								
Address									
Project									
II. Area of Fac	e of Sign								
Ground (max 150 SQFT)		Roof (max 150 SQFT)		Projection (max 100 SQFT)			Wall (max 150 SQ FT)		
			· · · · ·						
III. Type of Ins	tallation								
Permanent			Temporary			Face Change			
IV. Boardwalk	Vehicle	🗧 🕂 If	you need a pe	ermit, chec	ck this b	box and co	mplete requi	rements 🏒	
Date On	[	Date Off		Time On			Time Off		
Type of Vehicle	e(s)			Weight of	Vehicle	(s)			
V. Contact Info	ormation								
Owner									
Address									
Phone					Email				
Signature of Ov	wner if Acting a	as Contract	or <b>X</b>				Date		
Contractor	[								
Address									
Phone					Email				
OC Business L	icense				Lman				
Signature of Contractor X							Date		
, ,							Dute		
Electrical									
Address									
Phone					Email		1		
MHIC License			icense No.		OC		icense No.		
Signature of Ele	ectrical Contra	ictor X					Date		
<b>—</b> :					<b>C</b> (1)				
			cale showing tl ted with the ap		of the p	proposed sig	gn and every b	ouilding or	
			to scale shall		t not he	limited to t	he height abov	e the	
			and attachmen		t not be		ne neight abov		
	f-premise signs are prohibited. All signs shall be constructed to withstand the wind pressure as								
			ernational Build						
(6) months	s of the issuan	ice of this p	ermit.			-			

The applicant attests that the information provided is true and accurate. If any information is found to be incorrect or if any information affecting the project or application changes, a stop work order may be placed on the project or actions taken until all corrections have been made.