



Town of Bayfield

1199 Bayfield Parkway
 P.O. Box 80
 Bayfield, CO 81122
 970-884-9544

SIGN PERMIT APPLICATION

Please fill out this application **completely** and provide all information as indicated. **Incomplete applications will not be accepted.**

- I. Name Of Applicant/Contact Person: _____
- Mailing Address: _____
- Phone Number: _____ E-mail: _____
- Name of Business (where sign will be located): _____
- Address of Proposed Sign: _____
- Property Owner: _____
- II. 1. How many signs already exist on this property? _____
- a. How many existing signs will be removed? _____
- b. What are the dimensions of each existing sign that will remain?

Sign #	Dimensions (Length x Heights)	Square Feet
Sign #1		
Sign #2		
	TOTAL SQUARE FOOTAGE OF REMAINING SIGNS	

Note: A variance request is required for more than three signs

2. What is the linear frontage of the parcel along a public street? _____ feet.
3. How many new signs are proposed? _____
4. Will the new sign(s) be: Freestanding _____ Wall Mounted _____
 Wall Painted _____ Projecting _____
5. Will the proposed sign(s) be: Permanent: _____ Temporary: _____
6. Will the proposed sign(s) be: One-Faced: _____ Two Faced: _____ Multi-Faced: _____
7. How will the proposed sign(s) be mounted or affixed? _____
8. How high above the ground is the top of the proposed sign(s)? _____

9. What are the dimensions of the proposed sign(s)?

Sign #	Dimensions (Length x Height)	Illumination (Yes or No)	Square Feet
		TOTAL:	

10. How will the sign(s) be illuminated? No Illum. _____ Indirect Illum. _____
 Internal Illum. _____ Other _____

THE SIGN PERMIT APPLICATION CANNOT BE PROCESSED WITHOUT THIS INFORMATION:

- a. A **complete application**. If not complete, the application will not be accepted.
- b. A **site plan** including the lineal footage of the property frontage and locations of all existing & proposed signs.
- c. **Elevations** indicating locations of all existing and proposed signs in relation to the building.
- d. A **narrative and/or table** which describes each individual sign including: sign type (projecting, wall-mounted, etc); dimensions; square footage; total aggregate square footage; type of illumination; colors; lettering; materials.
- e. **Cut sheets** for all outdoor fixtures providing illumination.

Note: If the proposed signage requires a variance by the Bayfield Planning Commission, the applicant will have to follow the variance process outlined in the Bayfield Land Use Code. Some signs may require a building permit.

The undersigned requests the Town Manager to proceed with processing this application under the requirements of the Town of Bayfield Sign Code. The applicant acknowledges that the sign referencing said business shall not be placed or erected prior to **issuance** of a Town Business License for said business.

Date: * _____ Signature of Applicant:* _____

Printed Name: _____ Title: _____



FOR OFFICE USE ONLY

DATE PAID: _____ AMOUNT PAID: _____ LIC NUMBER ISSUED: _____

Town of Bayfield Administration & Planning Department:			
Does the Item Need To Be Taken To Planning Commission For A Variance Or Use By Review?		Yes	No
Does The Signs Meet Sign Code Requirements? :		Yes	No
Permit Issued?		Yes	No
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	<input type="checkbox"/> Held	Signature: _____ Date: _____
Comments: _____			

Town of Bayfield Building Inspector:			
Does the proposed sign need a building permit?		Yes	No
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	<input type="checkbox"/> Held	Signature: _____ Date: _____
Comments: _____			