

CITY OF MEBANE PERMIT APPLICATION

(919) 563-9990

SIGN PERMIT

Fax # (919) 563-9506

ZONING:	GPIN:	TAX MAP:	PERMIT No:
COUNTY: Alamance / Orange City Limits / County / ETJ Residential / Non-residential			LOT:
Property Address:			
Name of Business:		Email:	
Owner & Address:			
Permit Holder:			Phone#: ()
Address:			Fax #: ()

SIGN INFORMATION

# of Sign (s)	Type of Sign (s)	Sq. Footage of Sign (s)
	Wall/Ground/Projecting/Combination	
TOTAL COST OF CONSTRUCTION:	\$	FEE: \$

A drawing of the signs(s) shall be accompany this application.

The applicant declares that he/she does truly represent the property owner.

APPLICANT'S SIGNATURE _____ DATE _____

Print Name: _____

APPROVED BY _____ DATE _____

106 East Washington Street, Mebane N.C. 27302 WWW.CITYOFMEBANE.COM

Mail with permit fee to:

CITY OF MEBANE
INSPECTIONS DEPARTMENT
106 East Washington Street
Mebane, NC 27302