



Sign Permit Application

City of Johnston Iowa

Community Development Department 6221 Merle Hay Road, PO Box 410 Johnston, Iowa 50131 PH# 515-727-7778

Project Address _____ Application Date _____

Owners _____ Address _____ Suite # _____

City _____ State _____ Zip _____ Phone # _____

Applicant is the: (circle one) Property Owner / Contractor / Architect / Engineer / Other (describe) _____

Applicant Name _____

Address _____ City _____ State _____ Zip _____

E-mail _____ Phone # _____

All sign permit applications must include a dimensioned illustration of the proposed sign.

All building signs must include a visual representation of placement and include exterior building elevation dimensions.

All ground based signs must include a site plan showing sign placement including setback dimensions from property lines.

Proposed Sign Type Building _____ Monument/Project Identification _____ Temporary _____ Other _____

Overall Sign Height _____ Overall Width _____ Proposed Sign/Copy Area _____ (see sizing examples below)

Building, Window, and Awning signs use Formula A below for sizing. All other signs use Formula B below for sizing.

Building Signs ONLY

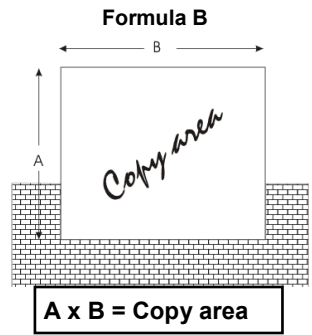
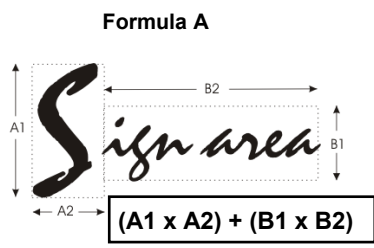
Building Has Street Frontage on... _____ Allowable Sign Area _____

$$\text{Owned / leased space facing Street Frontage width} \times \text{Wall height} \times 5\% = \text{Allowable Sign Area}$$

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of state law and local ordinances governing this type of work shall be complied with whether specified herein or not. The granting of a permit does not presume to give authority to cancel or violate any provision's of any state or local law regulating construction work or as associated with it. I further understand that I am responsible for properly locating the property lines to ensure placement conforms to local laws and ordinances.

Signature of Applicant _____ Date _____

Sizing Resources



Questions: Will the Sign be Backlit? Y / N

Will Floodlights be used? Y / N ***If YES,** Include Manufacturer's Cut Sheet of Light Fixture shielding.

Is there existing signage for this owned/leased space? Y / N

Does this sign replace an existing sign? Y / N

Square footage of existing signage _____

Date Completed _____ Total Permit Fees \$ _____ Permit # _____ **Office Use Only**

Approved By _____ Paid Date _____ Receipt # _____

Comments _____