

Village of Carroll

APPLICATION FOR SIGN PERMIT

Name: _____

Address: _____

Parcel #: _____

Phone: _____

Zoning District: _____

Design of Sign: _____

Including Total Area of Sign: _____

Exact Location of Sign(s) _____

In Relation to Building & Property: _____

Any Other Details: _____

OFFICE USE ONLY

DATE PERMIT ISSUED: _____ **PERMIT #:** _____

DATE PERMIT DENIED: _____

REASON DENIED: _____

DATE FEE PAID: _____ **SECTION 22.03 ZONING CODE**

AMOUNT PAID \$ _____

ZONING INSPECTOR