

Date Rcvd: _____
Ck #: _____ / Cash
Receipt #: _____
Mail / Pick-up



SIGN

Permit # _____
Permit Fee \$ _____

TOWN OF SEABROOK, NH
APPLICATION FOR SIGN PERMIT
Application must be in ink and legible

Project Address: _____
Tax Map: _____ Lot: _____ Seq.: _____ Zoning District: _____
Property Owner: _____ Tele #: _____ E-mail: _____
Address: _____
Tenant: _____ Tele #: _____ E-mail: _____
Tenant's Address: _____
Licensed NH Master Electrician _____ License #: _____ (Copy of Photo ID / License Required)
Address: _____ Tele #: _____ E-mail: _____

- **See other side for Information required with this application**

DESCRIPTION OF WORK (check all that apply)

Free Standing: _____ Wall: _____ Roof: _____

Commercial Sign Permit Fee: \$50.00 Plus \$6.00 per thousand of the estimated cost, or any part thereof.

- I hereby certify, under penalties of perjury, that the estimated cost of the above listed work, including all labor and materials is \$_____.
- I hereby certify that all plans and construction will comply with all Town of Seabrook and State of NH codes, ordinances, and regulations and that the project will be accessible for any and all inspections pertaining to this application.

➤ **Signature of Owner / Agent:** _____ **Date:** _____

(Over)

Required Information for Proposed Signs:

For all Signs

- a. All dimensions of sign
- b. All wording, depictions, photos on sign
- c. Photograph or drawing of the sign
- d. Drawings / Specifications of any lighting

For Wall Signs

- a. Dimensions of wall to have signage
- b. 10% calculation of sign / wall

For Roof Signs

- a. Drawing / specifications of structural support
- b. Type of material used for sign and support

For Free Standing Signs

- a. Drawing/ specifications of structural support
- b. Setback dimensions from lot lines and edge of pavement

For Suspended Signs

- a. Drawing / specifications of structural support
- b. Setback dimensions from lot lines and edge of pavement

- See Town of Seabrook Zoning Ordinance, Section 13-Signs

Agent Authorization: The individual listed as agent has my permission to act on my behalf for purposes of this application.

➤ **Property Owner Signature:** _____ **Date:** _____

---- OFFICE USE ONLY ----

TO BE FILLED OUT BY BUILDING INSPECTOR

Planning Board Case #: _____ ZBA Case #: _____

Date of Approval: _____

Date of Denial: _____ Reason for Denial: _____

If applicant was denied, indicate if the applicant was referred to: (circle)

Board of Adjustment Health Officer Board of Selectmen Planning Board

Building Inspector's Signature: _____