



CITY OF TORRINGTON

LAND USE OFFICE

140 Main Street, Torrington, CT 06790

(860) 489-2221 fax: (860) 496-5928

www.torringtonct.org

SIGN PERMIT

\$75 FEE PD _____

PROPERTY ADDRESS _____

BUSINESS NAME: _____

APPLICANT NAME: _____ PHONE: _____

APPLICANT ADDRESS: _____

APPLICANT E-MAIL ADDRESS: _____

OWNER NAME: _____ PHONE: _____

OWNER ADDRESS: _____

CALCULATED SF OF SIGNS ALLOWED: Refer to Section 5.15 Signs of Zoning Regulations

BUILDING _____ YARD _____

APPROXIMATE SF OF EXISTING SIGNS:

BUILDING _____ YARD _____

TYPE/SIZE OF SIGNS REQUESTED: check off the box(es) that apply and write down the proposed size of each sign.

- | | | | | | |
|-----------------------------------|-------------------------|-----------------------------------|------------------|-----------------------------------|-----------|
| <input type="checkbox"/> _____ sf | FREE STANDING | <input type="checkbox"/> _____ sf | WALL | <input type="checkbox"/> _____ sf | BANNER |
| <input type="checkbox"/> _____ sf | CANOPY | <input type="checkbox"/> _____ sf | CONSTRUCTION | <input type="checkbox"/> _____ sf | FARM |
| <input type="checkbox"/> _____ sf | HOME OCCUPATION | <input type="checkbox"/> _____ sf | LAMP POST BANNER | <input type="checkbox"/> _____ sf | MARQUEE |
| <input type="checkbox"/> _____ sf | PROJECTING SIGN | <input type="checkbox"/> _____ sf | REAR ENTRANCE | <input type="checkbox"/> _____ sf | ROOF SIGN |
| <input type="checkbox"/> _____ sf | RESIDENTIAL DEVELOPMENT | <input type="checkbox"/> _____ sf | WINDOW SIGN | <input type="checkbox"/> _____ sf | OTHER |

ATTACH A MAP SHOWING THE PROPOSED LOCATION OF THE SIGN. INCLUDE A DETAILED DRAWING OF THE SIGN'S SHAPE, SIZE, CONSTRUCTION, LOCATION, HEIGHT, DIMENSIONS AND ANY OTHER PIECE OF INFORMATION DEEMED NECESSARY FOR UNDERSTANDING THE INTENT OF THE APPLICATION.

THE INFORMATION GIVEN IS ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND IF THE INFORMATION IS FOUND TO BE INACCURATE OR FALSE THE PERMIT SHALL BE REVOKED.

APPLICANT SIGNATURE: _____ DATE: _____

FOR OFFICE USE ONLY

APPROVED/DENIED BY _____ DATE: _____

COMMENTS: _____
