

**Town of Scarborough  
Sign Permit**

Permit No. \_\_\_\_\_ Zone \_\_\_\_\_ Map \_\_\_\_\_ Parcel \_\_\_\_\_

Wall Sign[s]	30 Day Temporary Sign	Start:	Finish:
Roof Sign[s]	Official M.D.O.T. Sign[s]		
Free Standing Sign[s]	Other Sign		

Permit Address: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Contractor/Sign Co. Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Cost of Sign: \_\_\_\_\_

Is Location of Sign Conforming? \_\_\_\_\_

Sign Electrified? \_\_\_\_\_

Electrical Permit Required? \_\_\_\_\_

Scale Drawings \_\_\_\_\_ See Back

**SIGN ONLY**

\_\_\_\_\_ See Separate Page

**PLOT PLAN OR ELEVATION**

Completed by Applicant Provided Setbacks		For Official Use Only by Code Enforcement Office			
Front:	Side:	Rear:	Required Setbacks	Application Approved	Permit Fee:
				<b>Date of Approval:</b>	

\*\*The undersigned hereby applies for a permit to erect, alter, install, a sign in accordance with the Laws of the State of Maine, 1996 B.O.C.A. Building Code, the current Town of Scarborough Zoning Ordinance, any Planning Board approvals or conditions, any Zoning Board of Appeals approvals or conditions, any other plans or specifications if provided, any conditions of approval by the C.E.O.'s.

**APPLICANT SIGNED:**

**DATE:**

\_\_\_\_\_

\_\_\_\_\_

\*\* (Read above before signing)