

TOWN OF FAIRPLAY BUILDING PERMIT APPLICATION FOR CONSTRUCTING A SIGN

Fairplay Building Department
PO Box 267 Fairplay, CO 80440
719-836-2622 fax 719-836-3279

Application No.: _____

Please Type or Print Legibly

Date Received: _____

Tax Schedule No: _____ Project Address: _____

Legal Description: Subdivision: _____ Lot: ___ Block: ___ Filing: ___ Unit: ___

Applicant/Contractor: _____	Park County License No: _____
Mailing Address: _____	Phone: _____
City: _____	State: _____ Zip: _____
Owner: _____	Phone: _____
Mailing Address: _____	
City: _____	State: _____ Zip: _____

Property owners approval required and business registration is required for businesses.

Business lot Frontage _____ LF Number of Existing Signs _____ Total Area _____

Type ___ Freestanding ___ Roof ___ Marquess ___ Tempoary ___ Projecting ___ Wall ___ Other

Type of Illumination ___ none ___ Backlit ___ Neon ___ Flashing ___ Indirect

CHECKLIST OF REQUIRED INFORMATION FOR A FENCE PERMIT (all items must be submitted for a permit to be issued)

- _____ 1. Completed Sign Permit Application from the Building Department.
- _____ 2. Tax Schedule Number from the Park County Assessor's Office.
- _____ 3. Copy of the recorded deed showing current owner.
- _____ 4. A plot plan indication the location and dimensions of the proposed sign, distance to existing structures, property lines and Town Right-of-Ways must be included.
- _____ 5. A description and colored sketch of the proposed sign showing what the faces look like (photos are acceptable). Height length and height off of ground level shall be included.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give the authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Applicant/Contractor

Date

Owner

Date

For Building Department Use Only

Date Received: ___/___/___ **By:** _____

Date Reviewed: ___/___/___ **By:** _____

Date Approved: ___/___/___ **By:** _____

Complies with Zoning Y N

Variance Required Y N **Attach Copy**

Requires Planning Commission Approval Y N

Zoning: _____

Occupancy: Group _____ **Division** _____

Construction Type: _____

Plan Review Fee (commercial or R-3 only): \$ _____

Fee received by: _____ **Date:** _____

Notes: _____

