



# APPLICATION FOR SIGN PERMIT

Municipal Code 16-14

PO Box 351  
50 S Beech Street  
Hudson, CO 80642

Phone: 303-536-9311  
Fax: 303-536-4753  
info@hudsoncolorado.org

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

Applicant Address: \_\_\_\_\_

Applicant Phone: \_\_\_\_\_ Applicant Email: \_\_\_\_\_

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

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Email: \_\_\_\_\_

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

Permanent Temporary

Type of Sign:

Free Standing Wall Projecting Awning Mansard Canopy Banner  
Other: \_\_\_\_\_.

Illuminated: External Internal

Proposed Sign Description (may attach pictures to this document): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

# of Signs: \_\_\_\_\_ Location of Sign(s): \_\_\_\_\_ Height: \_\_\_\_\_ Width: \_\_\_\_\_

Total Area of PROPOSED Sign Faces: \_\_\_\_\_

Total Area of ALL EXISTING Sign Faces: \_\_\_\_\_

Sign Materials: \_\_\_\_\_

If Temporary:

Dates of Sign Display: \_\_\_\_\_

Event/Purpose: \_\_\_\_\_

Owner or Authorized Representative's Signature indicating, under penalty of perjury that, to the best of the applicant's knowledge, the foregoing is true, correct, and complete.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### FOR OFFICE USE ONLY

Permit #: \_\_\_\_\_.

Date Received: \_\_\_\_\_.

Amount Due: \_\_\_\_\_.

Fee Paid: Staff Initials: \_\_\_\_\_.

Approved: \_\_\_\_\_.

Date: \_\_\_\_\_.

Notes: \_\_\_\_\_.