CITY OF TUCSON
PLANNING & DEVELOPMENT
SERVICES DEPARTMENT
SIGNS DIVISION
P.O. BOX 27210
TUCSON, AZ 85726-7210

APPLICATION FOR PERMANENT SIGN PERMITS

NOT TO BE USED FOR TEMP SIGNS
BANNERS, A FRAMES, PENNANTS, BALLOONS

COT PDSD (520)791-5550
SIGN DESK (520) 837-4975
FAX (520) 791-4475
DSD_SIGNS@tucsonaz.gov

PERMIT #
SIGN ACCOUNT #
SIGN CODE #
DATE OF APPLICATIONS 1ST REVIEW

THIS BOX IS TO BE FILLED IN BY CITY OF TUCSON PERSONNEL ONLY

1st Inspection_____ Date_____ Approved_____ Corrections Required_____

2nd Inspection_____ Date_____ Approved_____ Corrections Required_____

3rd Inspection_____ Date_____ Approved_____ Corrections Required_____

APPROVED FOR PERMITS

	DATE	BY
SIGN		
ELECTR		
ZONING		
OL CODE		
STRUCT		

NAME OF BUSINESS THE SIGN IS FOR	STREET ADDRESS WHERE SIGN IS TO BE INSTALLED	PHONE # OF BUSINESS
OWNER/ BUSINESS TO BE BILLED ANNUALLY	**ADDRESS WHERE ANNUAL BILL WILL BE MAILED**	**PHONE # OF ENTITY BILLED ANNUALLY**

DATE	FRONTAGE	ZONE	DISTRICT	HOW MANY ELECTICAL CIRCUITS WILL BE REQUIRED	NUMBER OF EXISTING SIGNS THIS BUSINESS HAS ON SITE	NUMBER OF EXISTING SIGNS **TO BE REMOVED**

SIGN	SIZE IN **DECIMAL FEET** WIDTH x LENGTH	SQUARE FEET	HEIGHT TO TOP OF SIGN	SET BACK FROM "FACE OF CURB" FREESTANDING SIGNS ONLY	SIGN TYPE EX. WALL, POLE, FREE STANDING, CHANGE OF COPY	MATERIALS USED EX. PLASTIC, METAL, WOOD,	INTERNAL ILLUMINATION? YES or NO	ELEV N, E, S OR W	SIGN COPY	$ VALUE
EX.	2.25' × 7.42' =	16.7'	14.5'	40'	WALL	METAL & PLASTIC	YES	W	LOGO - PAPAZ PIZZA -TUCSONS FINEST	$ 3,000
A	× =									$
B	× =									$
C	× =									$
D	× =									$
E	× =									$
F	× =									$
G	× =									$
H	× =									$
I	× =									$

NAME OF CONTRACTOR/INSTALLER OF SIGN	PERSON TO CONTACT	PHONE # OF CONTACT PERSON

Certification: I hereby certify that the data submitted on or with this application is true and correct, that I am the Owner of the property at this address or, that for the purpose of obtaining this approval I am acting as agent on his behalf.

*

SIGNATURE OF PERSON SUBMITTING THIS APPLICATION

THIS BOX IS TO BE FILLED IN BY **NEW** SIGN CONTRACTORS
OR IF **CHANGES HAVE OCCURED** SINCE THE LAST APPLICATION YOU SUBMITED

STATE LICENSE #	NAME OF CONTRACTOR / INSTALLER	NAME OF ELECTRICAL CONTRACTOR
CITY PRIVILEGE LICENSE TAX #	PHONE OF CONTRACTOR / INSTALLER	ELECTRICAL CONTRACTOR STATE LICENSE #
ADDRESS OF CONTRACTOR / INSTALLER		EMAIL OF CONTRACTOR / INSTALLER

EVERY CONTRACTOR MUST HAVE A CERTIFICATE OF INSURANCE ON FILE WITH THE CITY OF TUCSON PDSD