



APPLICATION FOR ZONING PERMIT

SIGNS

Date _____

Application No. _____

Name of owner: _____

Address: _____ Phone No: _____

Location of property: _____ Map _____ Block _____ Lot _____

Zoning District: _____

Existing signs on property: Yes _____ No _____ Square Footage: _____ how many signs: _____

Proposed Sign Type: Temporary _____ Permanent _____ Wall Sign _____ Detached _____

Square Footage of Proposed Signage _____

Setbacks: Front: _____ ft. Rear: _____ ft. Side: _____ ft.

Sign Illuminated? Yes _____ No _____ If Yes, Illuminated External _____ or Internal _____

A sketch or engineered drawing showing the location and sign dimensions must accompany this application**

I hereby agree to conform to all requirements of the Laws of the State of CT and the Ordinances and Regulations of the Town of Thomaston, and to notify the Land Use Office of any alteration in the plans for which this permit is being requested. I furthermore agree the above described sign is to be located at the proper distance from all property and street lines as required by the Zoning Regulations or any other applicable local and state ordinances and regulations and it is understood that the sign upon completion will be used in compliance with the Zoning Regulations of the Town of Thomaston.

I hereby apply for a Zoning Permit for the use of property as described in the above application for a permit pursuant to Article 8 of the Zoning Regulations of the Town of Thomaston.

Print and Sign: _____ Date: _____

OWNER OR AGENT

(OFFICE USE ONLY)

Fee paid: \$ _____ Received by: _____ Check# _____ Cash _____

**Permission is hereby granted to the undertake the use as listed above.
Zoning Commission, Town of Thomaston, CT**

Approved by Zoning Agent _____ Date: _____
Zoning Agent

Denied by Zoning Agent _____ Date: _____

Reason: _____