



**Town of Ellettsville**  
**Department of Planning Services**

106 South Park Street, Ellettsville, IN 47429 ♦ (812) 876-8008 ♦ [planning@ellettsville.in.us](mailto:planning@ellettsville.in.us)

**Sign Permit  
Application**

Permit No. SP2021- Date Received \_\_\_\_\_

**Applicant Information**

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City/Town \_\_\_\_\_

E-mail \_\_\_\_\_ Phone No. (     ) \_\_\_\_\_

Property Owner \_\_\_\_\_ Check if applicant is owner

E-mail \_\_\_\_\_ Phone No. (     ) \_\_\_\_\_

**Sign Information**

Event/Business Advertised \_\_\_\_\_

Sign Location \_\_\_\_\_ Building Frontage (linear feet) \_\_\_\_\_

Sign Area (sq. ft.) \_\_\_\_\_ Existing Signage (sq. ft.) \_\_\_\_\_ Sign Height \_\_\_\_\_

Sign Type (separate applications required for multiple signs)

Freestanding     Wall     Multi-Tenant     Other \_\_\_\_\_

Changeable Copy Type:     None     Electronic     Manual

Lighting Type:     None     Internal     External     Other \_\_\_\_\_

<b>Notes</b>	<b>Required Information</b> 1. Completed & signed application 2. Sign renderings with dimensions 3. Sketch plan showing location of freestanding signs and showing location on building
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**Certification**

I certify that the information contained in this form is complete and accurate.

Applicant (sign) \_\_\_\_\_

Applicant (print) \_\_\_\_\_

**Office Use Only**

Parcel No. \_\_\_\_\_ Zoning \_\_\_\_\_ Permit Fee \$ \_\_\_\_\_

Payment Method Check/Cash    Check No. \_\_\_\_\_    Receipt No. \_\_\_\_\_

Reviewed By \_\_\_\_\_    Date Issued \_\_\_\_\_