

# SIGN PERMIT APPLICATION

*City Of Pryor Creek*  
P.O. Box 1167 - 12 N Rowe  
Pryor Creek, Ok 74362

Building Inspector  
Phone: 825-1679  
Fax: 825-6577

Date \_\_\_\_\_

Sign Contractor / Applicant \_\_\_\_\_

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

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

Contact Person \_\_\_\_\_

Project Name \_\_\_\_\_

Address For Sign \_\_\_\_\_

Height Of Sign \_\_\_\_\_ Width of Sign \_\_\_\_\_ Overall Height \_\_\_\_\_

Total Square Feet of Sign \_\_\_\_\_ Lot Frontage Length \_\_\_\_\_

Zoning District for Sign Placement \_\_\_\_\_

Building Height \_\_\_\_\_ Width \_\_\_\_\_ Depth \_\_\_\_\_

Does the Building have an exposed side?  Yes  No

Engineering Attached (IF REQUIRED)  Yes  Not Required

Wall Sign	<input type="checkbox"/>	} (PLEASE CHECK ONLY ONE)	
Ground Sign	<input type="checkbox"/>		<input type="checkbox"/> Erect
Illuminated Sign	<input type="checkbox"/>		<input type="checkbox"/> Relocate
Temporary Sign	<input type="checkbox"/>		<input type="checkbox"/> Re-Issue

Estimated Cost of Sign \$ \_\_\_\_\_

Proposed Work \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature of Contractor / Applicant \_\_\_\_\_

**PLEASE CALL THE BUILDING INSPECTION OFFICE TO SET UP AN APPOINTMENT FOR INSPECTION**