

## **SIGN PERMIT REVISION APPLICATION**

Business Name:		
Street Address:		
Sign Company:		
Address:		
City:State	:Zip:Pho	one: ()
Contact Person:	Phone: ()	Email:
Description of Revision:		
Permanent Sign Temporary	/ Sign Drawings Subi	mitted <u>Y / N</u> Electrical <u>Y / N</u>
SQUARE FEET	CONTRACT AMO	OUNT \$
By signing this application, I hereby certify that responsible to the City of Alabaster for any are application and the construction contemplate employees, contractors or sub-contractors.  Name (print):	nd all code violations and code enforced herein, whether such actions or inc	sement actions associated with this building actions were performed by me, my company,
Name (printy).	Signature.	bate
All illuminated Signs require a Certified Ele	-	license) in conjunction with issuance of the City of Alabaster Inspector before the Sign
Sign		Date
	OFFICE USE ONLY	
Zoning Approval	Engineering & Building Services Approval	
Zoning Coordinator	_	Building Official
Permit #	Report code	Revision Fee \$ 50.00