



Town of Scottsville
 401 Valley Street, Scottsville, VA 24590
 (434) 286-9267 • www.scottsville.org

Sign Permit
 Permit Number _____

Date: _____

Fee: \$10

\$20 - ARB required

18.5.6.6 GUIDELINES FOR SIGNS

Signs should relate to, rather than obscure and disrupt, the design elements of the building with which they are associated or to which they are attached. Signs should also be compatible with other signs and building along the street. Considerations for compatibility include dimensions, subject matter, materials, color, letter styles, legibility, lighting, overall effect and placement on the lot or on the building. All signs in or clearly visible from the historic district will comply with the requirements of section 18.5.4.

Applicant (Owner of Sign): _____

Mailing Address: _____

Telephone: _____

Installer (if other than applicant): _____ Phone No: _____

Site of Installation:

Street Address: _____ Tax Map and Parcel: _____

Premises Owner: _____

Signature of consent (if other than applicant): _____ Date _____

Sign Specifications:

- | | | |
|--|---------------------------------------|--|
| 1. <input type="checkbox"/> New sign | 2. <input type="checkbox"/> Permanent | 3. <input type="checkbox"/> Illuminated |
| <input type="checkbox"/> Modification of existing sign | <input type="checkbox"/> Temporary | <input type="checkbox"/> Non-Illuminated |

(Dates: _____ to: _____)

2. Sign 1 Size : _____X_____ Area: _____ft² Type: Wall Window Projecting Free Standing

Sign 2 Size : _____X_____ Area: _____ft² Type: Wall Window Projecting Free Standing

Sign 3 Size : _____X_____ Area: _____ft² Type: Wall Window Projecting Free Standing

Total Sign Area: _____ft²

3. For wall or window sign application, building frontage: _____feet.

4. For freestanding sign application: right-of-way frontage : _____feet.

Setback: _____feet (from edge of pavement)

Height: _____feet.

5. In a few words, please describe the manner in which the sign will be hung. Include descriptions of the hardware and any materials used in the supporting structure.

6. As thoroughly as possible, please describe where the proposed sign would fit in the overall site plan of the property. Include set-backs from property boundaries as well as any significant topographical or physical obstructions on the site. If necessary, feel free to include attachments.

This approval does not certify building code compliance. Building permits from Albemarle County officials may be required. Please contact the Office of Community Development at 434-296-5832 or bnelson@albemarle.org before construction.

I AGREE TO ERECT AND MAINTAIN THIS SIGN ACCORDING TO THE REPRESENTATIONS MADE IN THIS PERMIT APPLICATION IN COMPLIANCE WITH THE SCOTTSVILLE ZONING ORDINANCE.

Applicant's signature: _____ Date: _____

<u>For Official Use</u>	Attached File? <input type="checkbox"/> Yes <input type="checkbox"/> No
Zoning District: _____	
Zoning Official finding: _____ Date: _____	
<input type="checkbox"/> Adequate sketch of sign submitted <input type="checkbox"/> Conforms <input type="checkbox"/> ARB Review Required <input type="checkbox"/> Prohibited <input type="checkbox"/> Variance requested.	
ARB findings: _____	
By (Chair Person): _____ Date _____	
<input type="checkbox"/> Permit Issued. By (Zoning Administrator) _____ Date _____ Mailed to Applicant on: _____	

This paper shall constitute a valid sign permit upon its approval by the Zoning Administrator.