



CITY OF FRANKLIN, NEW HAMPSHIRE

"Three River's City"

Planning and Zoning Department
316 Central Street
Franklin, NH 03235

Tel: (603) 934-2341
Fax: (603) 934-7413
www.franklinnh.org

APPLICATION FOR SIGN PERMIT

Date: _____

Sign Permit No. _____ (Office Use)

Location: (street address) _____ Map/Lot # _____ Zoning District: _____

Historic District: ____ yes ____ no Downtown Redevelopment District: ____ yes ____ no

1) Property Owner: _____ Phone: _____

Address: _____ Email: _____

Letter of Authorization attached? ____ yes ____ no OR Owner Signature: _____

2) Applicant Name: _____ Business to be Advertised: _____

Mailing Address: _____

Phone No: _____ Email: _____

Signature of Applicant: _____ Print Name: _____

3) Person or Company Erecting Sign: _____

Mailing Address: _____

Phone No: _____ Email: _____

All sign applications must be accompanied by plans and elevations drawn to a standard scale in accordance with the dimensions listed on reverse and illustrating the following:

1. *An accurate representation of all proposed signage.*
2. *The exact location of the sign to its extreme edge or face.*
3. *The methods of attachment, structural support and illumination.*
4. *A master inventory by plan or photograph of all existing signs showing type, size, exact location and including dimensions of exterior walls.*
5. *Large signs will require structural certification by a NH licensed engineer.*

Sign information on reverse side

Type of Sign:	<input type="checkbox"/> Permanent	<input type="checkbox"/> Temporary
	<input type="checkbox"/> New Sign	<input type="checkbox"/> Repair/Alteration to Existing
	<input type="checkbox"/> Wall / Window	<input type="checkbox"/> Roof <input type="checkbox"/> Projecting
	<input type="checkbox"/> Electronic Message Board	<input type="checkbox"/> Free Standing <input type="checkbox"/> Other
	<input type="checkbox"/> Electric	<input type="checkbox"/> Non-Electric
Illuminated:	<input type="checkbox"/> Internally	<input type="checkbox"/> External (downcast Only) <input type="checkbox"/> None

Sign Material: _____

Overall Height Above Ground (measured to bottom of sign): _____

Extreme Dimensions of Signs (length x height): _____ X _____ = _____ SF Number of Faces _____

Exterior wall length (of store front) _____ Feet

Distance from front lot line: _____ Feet _____ Inches

Projection of sign over public way (Downtown Revitalization District Only): _____ Feet _____ Inches _____ N/A

	# Requested	Cost	Unit	Total Cost
APPLICATION FEE (Non-Refundable)				
Historic District		\$35.00	Each	
0-15 Sq Ft		\$40.00	Each	
16-30 Sq Ft		\$60.00	Each	
31-45 Sq Ft		\$80.00	Each	
46+ Sq Ft		\$100.00	Each	
Internally-lit sign (Additional per sign)		\$10.00	Each	
Temporary outdoor sign		\$10.00	Each	
TOTAL COST:				\$

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Payment: Amount \$ _____ Cash _____ Check _____ Check # _____ Date _____