PINAL COUNTY
WIDE OPEN OPPORTUNITY

PINAL COUNTY COMMUNITY DEVELOPMENT
BUILDING SAFETY DIVISION

85 N Florence Street 1st Floor / P.O. Box 2973 Florence AZ 85132
OFFICE: 520-509-3555 FAX: 520-866-6530

Building Permit #

MONUMENT/SIGN PERMIT APPLICATION

JOB/STREET ADDRESS: _____

PARCEL #: _____SUITE # (IF APPLICABLE) _____

LEGAL DESCRIPTION: SUBDIVISION _____ UNIT/BLOCK _____ LOT _____

SECTION_____ TOWNSHIP_____N/S, RANGE_____E/W, SIZE OF PARCEL _____

PROPERTY OWNER(S)/RENTER/TENANT _____ PHONE _____

MAILING ADDRESS _____ CITY _____ ST_____ZIP _____

BUILDER/CONTRACTOR_____PHONE_____

MAILING ADDRESS _____ CITY _____ ST_____ZIP _____

LICENSE # & CLASS _____

TYPE OF SIGN: ☐ DIRECTIONAL ☐ FREE STANDING ☐ WALL MOUNTED ☐ FLAG POLE

☐ ILLUMINATED → WILL SIGN ILLUMINATION REQUIRE INSTALLATION OF NEW METER? YES NO

☐ OTHER: _____

HEIGHT OF SIGN: _____

OF FACES: _____

TOTAL SQUARE FEET OF SIGN: _____

EXISTING USE: _____

PROPOSED USE: _____ (ex: Sign for Establishment Name)

DISTRICT OFFICE TO PICK UP PERMIT: FLORENCE

CONTACT PERSON (WHOM DO WE CONTACT WHEN PERMIT IS READY FOR PICKUP AND/OR QUESTIONS?)

NAME _____ PHONE _____

EMAIL _____

I UNDERSTAND THAT APPROVAL OF THIS APPLICATION DOES NOT GUARANTEE APPROVAL OF THE ACTUAL CONSTRUCTION.
I HEREBY CERTIFY THAT THE INFORMATION ON THIS APPLICATION AND ALL RELATED SUBMITTALS ARE TRUE AND CORRECT.

PRINT NAME PLEASE	SIGNATURE OF OWNER/ AGENT	DATE OF APPLICATION
_____	_____	_____

SPECIAL CONDITIONS: _____

FOR OFFICE USE ONLY

ADDRESS	YES NO				
AREA	N S E W	ZONING FEE	_____		
		ADDRESS FEE	_____	TYPE OF CONSTR.	_____
FLOODZONE	_____			OCCUP. CLASS	_____
NON-CONF	_____	SUBMITTAL FEE	_____	PLANS EXAMINER	_____
ZONING	_____	PLAN CHECK	_____	ACT. VALUATION	_____
CCO	_____	PERMIT FEE	_____	ECD DATE	_____