



City of Umatilla

Building Division
 700 6th St
 Umatilla, OR 97882
epermitting@umatilla-city.org
 (541) 922-3226 x108 Fax (541) 922-5758

SIGN PERMIT APPLICATION	
DEPARTMENT USE ONLY	
Permit No:	
Date Issued:	By:

WORK SITE LOCATION:

STREET ADDRESS OF WORK SITE:
TYPE OF SIGN:
<input type="checkbox"/> Wall <input type="checkbox"/> Freestanding <input type="checkbox"/> Roof <input type="checkbox"/> Outdoor Ad/Billboard <input type="checkbox"/> Under Marquee <input type="checkbox"/> Painted Wall <input type="checkbox"/> Temporary banner/Multifamily (*2 Months) <input type="checkbox"/> Temporary banner/other (*1 Month) <input type="checkbox"/> Temporary sign (*1 month)
PROJECT DESCRIPTION:

PROJECT INFORMATION:

For temp sign: Install date	
For temp sign: Removal date	
Weight of sign in pounds:	
Will there be a structural frame to attach sign to wall?	
Total height above grade to TOP of sign structure:	
Total height above grade to BOTTOM of sign structure:	
Sign length (feet and inches)	
Sign height (feet and inches)	
Area of sign in square feet	
Is electrical required:	
EXISTING SIGN INFORMATION:	
Sign permit #:	
Sign in square feet:	
Type of sign:	

CREDIT CARD INFORMATION:	
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD	Amount\$
Credit Card number:	
Exp:	CCV:
Cardholder Name:	
Cardholder Signature:	
Billing address:	

PEOPLE INFORMATION:

APPLICANT:		
Name:		
Full Mailing Address:		
City:	State:	Zip:
Phone:		
Email:		
PROPERTY OWNER:		
Same as applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name:		
Full Mailing Address:		
City:	State:	Zip:
Phone:		
Email:		
CONTRACTOR INSTALLATION		
Same as applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Business Name:		
Address:		
City/State/Zip:		
Phone:	Fax:	
E-mail:		
CCB license no.:		City Lic No.:
REQUIRED DOCUMENTS FOR APPLICATION		
I have downloaded and reviewed the plans and documents Checklist (Initials): _____		
SUBMITTAL METHOD FOR PLANS AND DOCS		
<input type="checkbox"/> Paper (2 copies) <input type="checkbox"/> Electronic <input type="checkbox"/> Not applicable		

Notices

Expiration of application: This application is valid for 180 days after it has been accepted as complete.

Inspections required: Approved city inspections must be completed before the work performed is enclosed.

Terms and conditions

Correct information: I hereby certify I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Copyright release for government entities: I hereby grant permission to the City of Umatilla to copy, in whole or part, drawings and all other materials submitted by me, my agents, or representatives. This grant of permission extends to all copies needed for administration of the City's regulatory, administrative, and legal functions, including sharing of information with other governmental entities.

Indemnity: I, the permit applicant, shall indemnify, defend and hold harmless the City of Umatilla, its officers, employees and agents from any and all claims arising out of or in connection with work done under this permit.

Owner installation: This installation is being made on residential or farm property owned by me or a member of my immediate family. This property is not intended for sale, exchange, lease, or rent. OAR 479.540(1) and 479.560(1).

Owner permission: I have the legal right or permission from any property owner whose property is affected by the work covered under this permit to: 1) enter the property; 2) perform the work covered under this permit; 3) leave structures on or in the affected property. The issuance of this permit shall not be construed as permission or a grant of a legal right to enter upon or remain on any property affected by the work covered under this permit.

Electronic signature certification: By attaching an electronic signature (whether typed, graphical or free form) I certify herein that I have read, understood and confirm all the statements listed above and throughout the application form.

I agree (initials): _____

Authorized Signature: _____ **Print Name:** _____ **Date:** _____