

City of Bay Minette

Sign Application

301 D'Olive Street · Bay Minette, Alabama 36507

OFFICE USE ONLY	
Received:	
Completed:	
Decision:	

Phone (251) 580-1650 · COBM_ Planning@cityofbayminetteal.gov

Are you the property owner? — Yes Form signed by the property owner)	□ No (If you are not the property ow	ner you must submit an Agent Authorization			
Applicant Name:	Email:				
		Business License #:			
Mailing Address:					
		Zip Code:			
Telephone #:					
	Site Information				
Business Name:		Business License #:			
Parcel ID No.:		PPIN No.:			
Physical Address (E-911):					
□ Yes □ No If YES, include the foll Number:	Total Display Area: ation of existing signs with setbacks ar				
	Building / Wall Sign				
Dimensions of the sign:	m finished grade):				
REQUIRED : Rendering of sign, show					
	9				
DIGITAL or ILLUMINATED Signs:	Intermittent on 6	Ctatio:			
Direction of Lighting:	Intermittent or 3	Intermittent or Static:Intensity:			
Hours of Illumination:	nnensity	Message Movement: times per day			
Hours of Illumination:Placement:	N	nessage Movement times per day			

Freestanding Sign

• • •		□ Shopping Center		
		a mombore:		
		=	e):	
REQUIRED : Render	ing of sign. including s	upport structures with dime	nsions; Site plan showing sign lo	ocation with setbacks
DIGITAL or ILLUMIN	• •			
	J	Intermitten	t or Static:	
				times per day
Images of exi Agent Authori Site Plan – inc the location of Easements Construction of requirements This certificate is valuation as the supplication is true.	on and Fee ng/Drawing of proposed sting signage with Site zation Form (if person dicating the proposed le f the sign in relation to: • Buildings • O and electrical specificat of the building code id for 180 days after da e and correct. I also un	Plan showing location other than property owner is ocation of the sign to be ere expected. Public right-of-way Sther signs on the property tions to determine that the state of issuance. I hereby ce	ected and the setbacks from pro	ral and electrical on and submitted with
Applicant Signature:			Date:	
Application Fee: \$50.	00 + Display Area Sq. F	eet X \$2.00 =	Total Fee \$	
S	Date Paid:	□ Cash □	CC □ Check #:	
Zoning:	_ Address: Verified or	r □ Correction/Assignment: _		
Reviewed by:			Date:	
				_
-				
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