



ZONING APPLICATION FOR SIGN PERMIT

Town of Wilton, Connecticut

This application shall be submitted along with the appropriate sign renderings and specs as required.

ANY changes to the plans after initial approval must be reviewed and reapproved by Planning and Zoning.

Applicant to fill out upper portion only and sign.

Address of Property: _____ Date _____

Owner _____ Tel. _____ Email _____

Owner's Mailing Address: _____

Agent/Contractor (If Applicable): _____ Tel. _____

Agent/Contractor's Email: _____

Type of Sign: New _____ Replacement _____:

1. Free Standing

Area of existing signs on premises: _____

Area allowed for zone district: _____

Area of proposed sign(s): _____

Total Square Feet: _____

2. Building Mounted

Area of existing signs on building: _____

Linear feet of building/store frontage: _____

Area of proposed sign(s): _____

APPLICANT DECLARATION

I hereby represent the information provided in this application, including submitted plans and addendum documents, to be both true and accurate. With the issuance of this document the undersigned certifies that to the best of his/her knowledge and belief, the work described above conforms with the Town of Wilton Zoning regulations.

Applicant Signature (Print and Sign)

Date

*******FOR OFFICE USE ONLY*******

ZONING INFORMATION AND APPROVALS

Zone _____ Parcel # _____ Lot Size _____ Zoning Sign Permit # _____

Total Square Feet: _____

Conditions or Commission or Board Approval if applicable:

Notes _____

Approved By _____ Date _____

Zoning Officer