

SIGN BUILDING PERMIT APPLICATION - WORK SHEET

CITY OF RAPID CITY
300 SIXTH ST • RAPID CITY, SD 57701
(605) 394-4157

APPLICATION DATE: _____

PROPERTY INFORMATION	CONTRACTOR INFORMATION
<p>LOT ADDRESS <u>632 St. Joseph</u></p> <p>OWNER NAME _____</p> <p>& ADDRESS _____</p> <p style="text-align: right;">TEL _____</p> <p>LEGAL DESC _____</p> <p>_____</p> <p>_____</p> <p>ZONED _____ ACRES _____</p> <p>SETBACKS _____</p> <p>EASEMENTS _____</p> <p>ACCESS FROM _____</p> <p>PERMIT TYPE <u>Sign</u></p> <p># OF SIGNS _____ # SQ FT _____</p> <p>APPEAL # _____ DRAINAGE _____</p> <p>APPEAL # _____ BASIN CODE _____</p> <p>COMMENTS _____</p> <p>_____</p> <p>_____</p> <p>FLOODPLAIN? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></p> <p>DATE STRUCTURE WAS BUILT IF HISTORIC REVIEW REQUIRED _____</p>	<p>CONTRACTOR <u>Signs Now</u></p> <p><u>1601 Deckerwood Ave #7</u></p> <p style="text-align: right;">TEL <u>721-6965</u></p> <p>ARCHITECT/ SURVEYOR _____</p> <p style="text-align: right;">TEL _____</p> <p>ENGINEER _____</p> <p style="text-align: right;">TEL _____</p> <p>ELECTRICAL _____</p> <p style="text-align: right;">TEL _____</p>
APPLICANT INFORMATION	FEE INFORMATION
<p>NAME <u>Reset Weight / Cheryl Carleba</u></p> <p>ADDRESS <u>632 St. Joseph</u></p> <p>CITY/STATE <u>R. C., S.D.</u> TEL <u>391-8697</u></p> <p>RELATIONSHIP TO PROPERTY _____</p> <p><input type="checkbox"/> OWNER <input checked="" type="checkbox"/> CONTRACTOR <input type="checkbox"/> OWNERS REPRESENTATIVE</p>	<p>TOTAL COST <u>660.00</u></p>

SIGN INFORMATION

FRONTAGE LENGTH 140/5 ALLOWABLE SQ. FOOTAGE _____

NEW SIGNS: Construction drawing, elevation drawing, and site plan required.

SIZE	DIMENSIONS	TYPE	HEIGHT	SETBACK	GROUND CLEARANCE	ON-PREMISE MESSAGE	ILLUMINATION
SF	20 x 12	pedestrian	12'		3'	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Y <input checked="" type="checkbox"/> N
SF						Y <input type="checkbox"/> N	Y <input type="checkbox"/> N
SF						Y <input type="checkbox"/> N	Y <input type="checkbox"/> N
SF						Y <input type="checkbox"/> N	Y <input type="checkbox"/> N
SF						Y <input type="checkbox"/> N	Y <input type="checkbox"/> N
SF						Y <input type="checkbox"/> N	Y <input type="checkbox"/> N
SF						Y <input type="checkbox"/> N	Y <input type="checkbox"/> N
SF	SUBTOTAL					Y <input type="checkbox"/> N	Y <input type="checkbox"/> N

EXISTING SIGNS: Describe all existing signs on the premises.

SIZE	DIMENSIONS	TYPE	HEIGHT	SETBACK
SF				
SF				
SF				
SF				
SF				
SF				
SF	SUBTOTAL			

EXISTING _____ + NEW 2 Ped Sign = TOTAL SIGN SF 2

SITE INFORMATION

ZONING: GC CBD HIST LI LDR MDR NC OC OTHER _____

CHANGE IN SIC CODE: YES NO BUILDING PERMIT REQUIRED: YES NO NOT FOR THIS

SITE TRIANGLE UNOBSTRUCTED: YES NO

HISTORICAL BUILDING: DISTRICT ENVIRONS

HISTORICAL REVIEW REQUIRED: YES NO REVIEW DATE: _____ APPROVED: YES NO

PCD REVIEW REQUIRED: YES NO REVIEW DATE: _____ APPROVED: YES NO

APPLICANT HAS CHECKED FOR EASEMENTS: YES NO

ALL SIGNS IDENTIFIED (LOCATION, SIZE, TYPE): YES NO

OFFICE USE ONLY

APPROPRIATE SIGN INFORMATION PROVIDED: YES NO

APPROPRIATE SITE INFORMATION PROVIDED: YES NO

ACCEPTED DENIED MAY BE APPEALED

COMMENTS: _____

REVIEWED BY: _____ DATE: _____