



**Town of East Longmeadow
Building Department**

60 Center Square, East Longmeadow, Massachusetts 01028 – (413) 525-5400 ext. 1150

SIGN PERMIT APPLICATION

(One application per sign- \$50.00 fee per application)

Date: _____

Business Name & Address: _____

Business Owners Name & Address: _____

Property Owners Name & Address: _____

Contact Person & Telephone Number: _____

Sq. Ft. Area of Proposed Sign(s): _____

Free Standing: Yes () No () Height above ground level: _____

Attached to Building: Yes () No ()

Projection, if any _____ (must comply with Zoning By-law 5.8)

Setback from property line: _____ feet Distance to nearest side yard line: _____ feet

Distance to top of sign above vertical wall: _____ feet

Permanent: _____ Temporary: (90 days) _____ Illuminated: _____ Non-illuminated: _____

ATTACH ONE COLOR RENDERING TO SCALE OF THE PROPOSED SIGN INDICATING THE COLOR, SIZE AND LOCATION AT WHICH SAID SIGN WILL BE ERECTED. SCALE AND METHOD OF MEASUREMENT MUST BE SHOWN ON RENDERING.

Number of existing signs: _____ Total Square Feet of existing signs: _____

Number of proposed signs: _____ Total Square Feet of proposed signs: _____

Total square feet of Proposed and existing signs: _____

Applicant: (print) _____

Signature: _____

Estimated Cost of sign: \$ _____

WORKER'S COMPENSATION INSURANCE AFFIDAVIT (M.G.L. C. 152, §25c.) Attached

Sign approved Sign denied

Building Commissioner Date Issued/ Denied