



Lumpkin County, Georgia

Planning Department

SHORT STREET, SUITE 10, DAHLONEGA, GEORGIA 30533 (706) 864-6894 FAX: (706) 867-7272

Sign Permit # _____

ALL FIELDS MUST BE COMPLETE IN ORDER FOR YOUR APPLICATION TO BE PROCESSED ADDITIONAL INFORMATION REQUIREMENTS ON REVERSE

TAX MAP & PARCEL NUMBER: _____ LAND USE _____ DATE _____

APPLICANTS NAME: _____ PHONE # _____

MAILING ADDRESS: _____

SIGN ADDRESS: _____

BUSINESS NAME: _____

SIGN COMPANY: _____

COMPANY CONTACT: _____
(IF DIFFERENT FROM APPLICANT)

ADDRESS: _____ PHONE # _____

PERMANENT

TEMPORARY

TYPE OF SIGN (SEE DIAGRAM ON REVERSE) _____

ATTACH THE FOLLOWING

COLOR PICTURE OF SIGN _____ SIZE IN SQUARE FEET: _____

AN ATTACHED SIGNED WRITTEN AGREEMENT FROM PROPERTY OWNER _____

A SCALED DRAWING WITH DIMENSIONS AND SPECIFICATIONS _____

A COPY OF PLAT WITH SHOWN RIGHT OF WAY _____

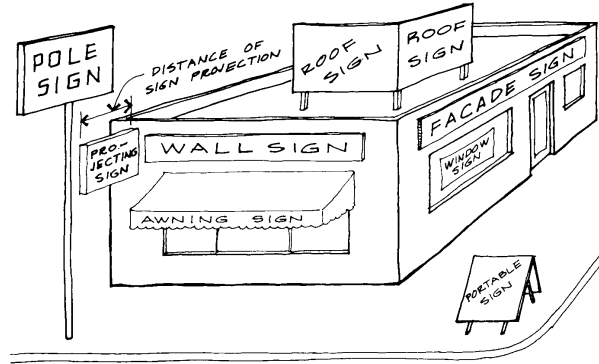
DISTANCE BETWEEN EXISTING AND PROPOSED SIGNS _____

ITEMIZED LIST AND KEYED SITE PLAN AT A SUITABLE SCALE SHOWING SETBACKS, LOCATION OF ALL EXISTING, TO BE REMOVED, AND PROPOSED SIGNS _____

HEIGHT FROM GROUND TO HIGHEST POINT _____ WIDTH FROM SIDE TO SIDE _____

MATERIALS THE SIGN IS MADE OF _____

ILLUMINATED YES NO IF YES INTERNAL OR EXTERNAL _____



SIGN TYPES

LUMPKIN COUNTY SIGN AFFIDAVIT

SIGN PERMIT # _____ ADDRESS _____

I CERTIFY THAT I _____, HAVE A SIGN REFERENCED BY THE
(PRINT NAME)

ABOVE PERMIT NUMBER FOR MYSELF AND/ OR MY BUSINESS. I UNDERSTAND THAT ALL OF THE COUNTY RULES AND REGULATIONS WILL APPLY TO ME AND BE ENFORCED BY THE COUNTY. I FURTHER UNDERSTAND THAT AS THE OWNER I AM SOLELY RESPONSIBLE FOR ANYTHING IN RELATION TO THE SIGN AND WILL ONLY MAINTAIN IT IN ITS PRESENT LOCATION. IF THE SIGN IS NOT ON MY PROPERTY I ALSO CERTIFY THAT I HAVE WRITTEN AND SIGNED PERMISSION TO PLACE MY SIGN ON THE OWNERS PROPERTY. I ALSO CERTIFY THAT THE SIZE OF THIS SIGN WILL NOT INCREASE AND IT IS OUT OF THE RIGHT OF WAY. APPLICANT FURTHER AGREES TO INDEMNIFY AND HOLD HARMLESS COUNTY AGAINST ANY LOSS OR DAMAGE, TO INCLUDE ANY COST OF DEFENSE, ARISING FROM ANY CLAIM, DEMAND OR EXPENSE ARISING FROM OR OUT OF THE PLACEMENT OF THE PERMITTED SIGN, TO INCLUDE CONTENT, OR THE INSTALLATION OF THE SIGN HEREIN APPLIED FOR, WITH ANY MORE SPECIFIC LANGUAGE FOR THE PARTICULAR APPLICATION.

BY THE SIGNATURE BELOW YOU ARE CERTIFYING THAT THE INFORMATION PROVIDED ON THIS FORM IS TRUE AND ACCURATE, AND THAT YOU UNDERSTAND AND WILL ABIDE BY ALL APPLICABLE COUNTY REGULATIONS.

SIGNATURE OF OWNER _____ DATE _____

OFFICE USE ONLY

ISSUED BY: _____ DATE: _____

COMMENTS/CONDITIONS: _____