

# Permanent Sign Permit Application



City of Cayce  
South Carolina

TMS # \_\_\_\_\_

ISSUE DATE: \_\_\_\_\_

Type of Signage:     On premise                       Wall                       Monument                       Roof  
                                   Off Premise                       Marquee                       Projecting                       Other

Location of Signage: \_\_\_\_\_ Zoning: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicant: \_\_\_\_\_ Sign Company: \_\_\_\_\_

Address: \_\_\_\_\_ Applicant Phone: \_\_\_\_\_

(Off Premise Only):    Lease Agreement:    Yes \_\_\_\_\_ No \_\_\_\_\_    Verbal \_\_\_\_\_ Written \_\_\_\_\_

SKETCH PLAN	LOCATION
<p><b>SKETCH PLAN SHALL SHOW AS A MINIMUM:</b></p> <p>1 - Overall height of signage.            2 - Overall width of sign location.            3 - Height to bottom of signage measures either from ground level or edge of payvement, whichever is applicable.</p>	<p><b>LOCATION SHALL SHOW AS A MINIMUM:</b></p> <p>1 - Distance from corners, curbs, driveways, etc., sufficient to field - check location.            2 - Distance from front or side property lines, whichever is applicable.            3 - Clearly defined front and side yard setbacks.</p>

**Total Value of Signage: \$ \_\_\_\_\_**

**CONSTRUCTION PLANS AND SPECIFICATIONS FOR EACH SIGN MUST ACCOMPANY THIS FORM.  
 PERMIT WILL NOT BE PROCESSED WITHOUT THIS INFORMATION.  
 SIGN RECEIPTS ARE NO LONGER PERMITS, YOUR COPY OF THIS FORM IS.  
 ANY CHANGES NOT APPROVED WILL VOID THIS PERMIT IMMEDIATELY!  
 THIS PERMIT IS VALID FOR SIX (6) MONTHS OR START OF CONSTRUCTION,  
 ONE (1) YEAR TO COMPLETE CONSTRUCTION.**

*By applying for and signing this sign permit, I hereby affirm that I will abide by all Ordinances & Regulations as enacted by the City of Cayce now in effect or as lawfully enacted.*

\_\_\_\_\_  
 Applicant Date

**FOR PLANNING & DEVELOPMENT USE**

Issued by: \_\_\_\_\_ Date: \_\_\_\_\_     Approved (Initial) \_\_\_\_\_     Denied (Initial) \_\_\_\_\_

FOR INSPECTION USE	FOR FINANCE OFFICE USE	
1st Inspection: _____ Date: _____	Receipt #	Date
2nd Inspection: _____ Date: _____	Fee	
Final Inspection: _____ Date: _____	Sign	\$ _____
Remarks: _____	5% Deposit for Sign Removal	\$ _____
	Total	\$ _____