

## Planning, Engineering and Development

Telephone: (709) 748-1000 E-mail: planning@mountpearl.ca Website: www.mountpearl.ca

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City of Mount Pearl
3 Centennial Street
Mount Pearl, NL A1N 1G4

SIGN PERMIT APPLICATION				
CONTACT INFORMATION (Please Print)				
Property Owner:		Sign Company/Contractor:		
Mailing Address:		Mailing Address:		
Postal Code:		Postal Code:		
Phone:		Phone:		
Email:		Email:		
SIGN PROJECT DETAILS (Please Print)				
Business Owner Estimated Cost:		Electrical Req'd:		
Civic Address: \$			☐ Yes ☐ No	
• Stamped Engineering Drawings are required for Billboard Signs, Changeable Message Signs, Roof Signs;				
and Ground/Pylon Signs that are greater than 3 meters in height (see Regulation 8.18).				
☐ Banner	☐ Billboard		☐ Canopy	
☐ Marquee	□ Roof		□ Wall	
☐ Ground/Pylon	☐ Portable		☐ Other	
Width: Area:	Height:	Illuminated:	Changeable Message:	
		□ Yes □	No ☐ Yes ☐ No	
Election Signs:	lunicipal	☐ Provincial	☐ Federal	
Portable Signs: 3	months	□ 1 year		
DECLARATION: I hereby submit this application and confirm that the information supplied is correct and complete to the best of my knowledge. I agree to comply with all Municipal Regulations, the National Building Code, Current Edition and ancillary codes, agree to build in accordance with the plans approved by the City of Mount Pearl, and not to commence building without applicable written approval and permits from the City of Mount Pearl.		Please Note:  The required Permit Fee (see City's Schedule of Rates and Fees) is to accompany the application form.  Prior to formally submitting an application form, it is advisable that the applicant set up an appointment to review the application with the Planning Division to ensure that all required information has been supplied and to facilitate application processing.		
NOTE: Where the Applicant and the Property Owner are <u>not</u> the same, the signature of the Property Owner is required <u>before</u> the application can be accepted for processing.		FOR STAFF USE Date Fee(s) Received:		
Applicant:		Received By:	Received By:	
Date:		Receipt #:		
Property Owner:		Assigned To:		
Date:		DA #:		
FOR APPROVAL (OFFICE USE ONLY)				
Occupancy Permit Issued for this Business Drawings Supplie			Referred to Council	
Associated with Sign				
☐ Yes ☐ No	☐ Yes	□ No	☐ Yes ☐ No	
TOTAL DUE \$	APPROVED		DATE	