

Municipal Regulation Specialist_____

City of Belen 100 South Main Street Belen, New Mexico 87002 505-966-2739

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Sign Permit Application

| | Name: | | | | | | |
|---|--------------------------------------|--|---|---------|--------------------|--|--|
| | Address:_ | | | | | | |
| City, ST, Zip Code: | | | | | | | |
| | | ne:W | | | - | | |
| | Site Location | on: | | | _ | | |
| | Total Squa | re Footage of sign(s): | | | _ | | |
| | Present use of propertyProperty Zone | | | | • | | |
| | | | | | _ | | |
| | . | Legal Desci | <u> </u> | N.4 | | | |
| | Township | z Range: | Section: | Map: | | | |
| • | Tracts: | | | | - | | |
| | Lands of (| f applicable): | | | | | |
| | | hone number of person, firm, corporation, or as: | | | | | |
| | | , , , , , , | 0 0 | | | | |
| <u>Sig</u> 1. | | on (Please attach the following information for | | | | | |
| ٠. | A) | manent copies of the plans are specifications drawn to scale and including: The dimensions of the sign face and its supporting members and, where applicable, the dimensions and a pl | | | nsions and a pho - | | |
| | ~, | ograph of the wall surface of the building to which it is to be attached. | | | | | |
| | В) | description of the materials used for construction of the sign. | | | | | |
| The maximum height and minimum clearance of the sign.The position of the sign in relation to the front of the building and to adjacent buildings, structures, or o | | | | | | | |
| | | | | | | | |
| | E) | Location of the sign in relation to boundaries | of the lot upon which it is si | tuated. | | | |
| 2. | Written co | onsent from the owner of the building, structure | at from the owner of the building, structure, or land to which or on which the sign structure is to be erected. | | | | |
| 3. | Any electr | ical permit and application required and issued t | ermit and application required and issued for the sign. | | | | |
| 4. | A copy of | copy of the lease for property on which sign is located, if appropriate. | | | | | |
| Apı | olicant Signat | ure Da | ate | | | | |
| | | D | | | | | |