



**CITY OF EAGLE
PLANNING AND ZONING
SIGN PERMIT APPLICATION**

660 E. Civic Lane, Eagle, Idaho 83616
Phone: (208)939-0227 www.cityofeagle.org

FILE NO: _____

CROSS REF. FILES: _____

FEE: _____

----- City Date Stamp -----

The Sign Permit Application must be filled out in its entirety, along with the Design Review Sign checklist, submittal documentation, and correct fees.

PROJECT/SITE ADDRESS & LOCATION		
Tenant Name:		
Permit Address:	City/State/Zip:	
Subdivision:	Lot:	Block:
DESCRIBE SIGNAGE:		
CONTRACTOR		
Contractor Co. Name:	Phone:	
Co. Address:	City/State/Zip:	
Email:		
State License #:	License Expiration Date:	
OWNER		
Owner Name:	Phone:	
Address:	City/State/Zip:	
Email:		
REPRESENTATIVE (If different from above)		
Representative Name:	Phone:	
Address:	City/State/Zip:	
Email:		

APPLICANT'S CERTIFICATION

This permit is issued subject to the regulations contained in the 2018 IBC, 2018 IECC, and the Zoning Regulations stated in the Eagle City Code.

I do hereby certify that, to the best of my knowledge and belief, all application, application materials, and a completed checklist have been submitted, and that the information they contain is true and correct.

Printed Name of Applicant/Representative _____ Date _____

Signature of Applicant/Representative _____ Date _____

City Staff Comments: _____

Signature of receipt by City Staff _____ Date _____