City of Twin Falls
Planning & Zoning Department
203 Main Ave. E.
P.O. Box 1907
Twin Falls, ID 83303-1907

Phone: 208-735-7267
Fax: 208-736-2256
www.tfid.org

Sign Permit Application

PROJECT INFORMATION

Project Address: _____ Phone #: _____

Business/Tenant using space: _____ Estimated Value $ _____

Describe the # and types of signs propose: _____

PROPERTY OWNER INFORMATION

Name: _____

Contact Person: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

CONTRACTOR INFORMATION

Business Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

State Registration # & Expiration Date: _____

Current Signage:

Sign #	Type	Illuminated	Sq. ft. per sign	Height	Location

Proposed Signage:

Sign #	Type	Illuminated	Sq. ft. per sign	Height	Location

SIGN PERMIT APPLICATION MINIMUM REQUIREMENTS

1. – **Electronic PDF of plans (email to buildingfax@tfid.org)**
2. – **Signs drawn to scale and dimensioned; attach a color rendering that represents the actual sign(s).**
3. – **Site Plan - scaled, showing**:
   - North arrow and scale.
   - Dimensioned location of proposed and existing sign(s) on property.
   - Street frontage dimensions and all street names.
   - Dimensioned property lines.
   - Existing and proposed buildings
   - Right of way.
   - Dimensions from outer edge of sign and/ or foundation to back of sidewalk and/or face of curb.
   - Dimensions of wall(s).
4. – **Sign Elevations, showing**:
   - Dimensions, locations, and orientation for every sign, existing and proposed.
   - Height of sign from ground.
   - Face, pole covers, non-lettered areas, base, poles, and non-lettered symbols.
   - Projection of sign.
5. – **Foundation details for all free-standing signs & attachment details for wall signs.**
6. – **Completed application form.**
7. – **Electrical permit application (if illuminated sign)**

I certify that the value & scope of work provided above are the most accurate available at this time:

_____   _____   _____
Print Name   Signature   Date