



# CITY OF BAYTOWN

## SIGN PERMIT APPLICATION

Building Services Division  
2401 Market Street Baytown, TX 77520  
[building@baytown.org](mailto:building@baytown.org)  
Phone: 281-420-6537

Incomplete applications will not be accepted.

Indicate "NA" when an item does not pertain to your application.

BUSINESS INFORMATION			
<b>BUSINESS NAME:</b> _____			
<b>PROJECT ADDRESS:</b> _____			
<b>BUSINESS:</b> <input type="checkbox"/> NEW <input type="checkbox"/> EXISTING <input type="checkbox"/> RELOCATING		<b>CERTIFICATE OF OCCUPANCY:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	
SIGN INFORMATION			
<b>SIGN STRUCTURE # 1 –</b> <input type="checkbox"/> NEW <input type="checkbox"/> REPLACEMENT <input type="checkbox"/> EXISTING		<b>SIGN STRUCTURE # 2 –</b> <input type="checkbox"/> NEW <input type="checkbox"/> REPLACEMENT <input type="checkbox"/> EXISTING	
<b>SIGN TYPE</b> <input type="checkbox"/> GROUND <input type="checkbox"/> MARQUEE <input type="checkbox"/> PROJECTING <input type="checkbox"/> ROOF <input type="checkbox"/> WALL <input type="checkbox"/> PORTABLE		<b>SIGN TYPE</b> <input type="checkbox"/> GROUND <input type="checkbox"/> MARQUEE <input type="checkbox"/> PROJECTING <input type="checkbox"/> ROOF <input type="checkbox"/> WALL <input type="checkbox"/> PORTABLE	
<b>DIMENSION:</b> LENGTH _____ FT x WIDTH _____ FT = _____ TOTAL SQ FT VERTICAL HEIGHT _____ FT (ABOVE GRADE) ELECTRICAL ___ YES ___ NO <input type="checkbox"/> SINGLE FACE <input type="checkbox"/> DOUBLE FACE _____ TOTAL SQ FT		<b>DIMENSION:</b> LENGTH _____ FT x WIDTH _____ FT = _____ TOTAL SQ FT VERTICAL HEIGHT _____ FT (ABOVE GRADE) ELECTRICAL ___ YES ___ NO <input type="checkbox"/> SINGLE FACE <input type="checkbox"/> DOUBLE FACE _____ TOTAL SQ FT	
DESCRIPTION: _____		DESCRIPTION: _____	
<b>SIGN STRUCTURE # 3 –</b> <input type="checkbox"/> NEW <input type="checkbox"/> REPLACEMENT <input type="checkbox"/> EXISTING		<b>SIGN STRUCTURE # 4 –</b> <input type="checkbox"/> NEW <input type="checkbox"/> REPLACEMENT <input type="checkbox"/> EXISTING	
<b>SIGN TYPE</b> <input type="checkbox"/> GROUND <input type="checkbox"/> MARQUEE <input type="checkbox"/> PROJECTING <input type="checkbox"/> ROOF <input type="checkbox"/> WALL <input type="checkbox"/> PORTABLE		<b>SIGN TYPE</b> <input type="checkbox"/> GROUND <input type="checkbox"/> MARQUEE <input type="checkbox"/> PROJECTING <input type="checkbox"/> ROOF <input type="checkbox"/> WALL <input type="checkbox"/> PORTABLE	
<b>DIMENSION:</b> LENGTH _____ FT x WIDTH _____ FT = _____ TOTAL SQ FT VERTICAL HEIGHT _____ FT (ABOVE GRADE) ELECTRICAL ___ YES ___ NO <input type="checkbox"/> SINGLE FACE <input type="checkbox"/> DOUBLE FACE _____ TOTAL SQ FT		<b>DIMENSION:</b> LENGTH _____ FT x WIDTH _____ FT = _____ TOTAL SQ FT VERTICAL HEIGHT _____ FT (ABOVE GRADE) ELECTRICAL ___ YES ___ NO <input type="checkbox"/> SINGLE FACE <input type="checkbox"/> DOUBLE FACE _____ TOTAL SQ FT	
DESCRIPTION: _____		DESCRIPTION: _____	
<b>SIGN STRUCTURE # 5 –</b> <input type="checkbox"/> NEW <input type="checkbox"/> REPLACEMENT <input type="checkbox"/> EXISTING		<b>TOTAL SQ FT OF NEW SIGN(S) =</b> _____ <b>SQ FT</b> <b>COST OF PROJECT: \$</b> _____	
<b>SIGN TYPE</b> <input type="checkbox"/> GROUND <input type="checkbox"/> MARQUEE <input type="checkbox"/> PROJECTING <input type="checkbox"/> ROOF <input type="checkbox"/> WALL <input type="checkbox"/> PORTABLE			
<b>DIMENSION:</b> LENGTH _____ FT x WIDTH _____ FT = _____ TOTAL SQ FT VERTICAL HEIGHT _____ FT (ABOVE GRADE) ELECTRICAL ___ YES ___ NO <input type="checkbox"/> SINGLE FACE <input type="checkbox"/> DOUBLE FACE _____ TOTAL SQ FT			
DESCRIPTION: _____			
<b>BUSINESS OWNER NAME:</b> _____			
<b>MAILING ADDRESS:</b> _____			
<b>E-MAIL ADDRESS:</b> _____			<b>PHONE:</b> _____
<b>SIGN CONTRACTOR BUSINESS NAME:</b> _____			
<b>MAILING ADDRESS:</b> _____		<b>LIC #</b> _____	<b>EXPIRATION:</b> _____
<b>E-MAIL ADDRESS:</b> _____			<b>PHONE:</b> _____

**CERTIFICATION:** THE UNDERSIGNED HEREBY CERTIFIES THAT ON THIS DATE APPLICATION WAS MADE FOR A PERMIT WITH THE CITY OF BAYTOWN AND THAT THE INFORMATION PROVIDED ON THIS APPLICATION FORM AND ANY PLANS OR SUPPORTING DOCUMENTATION SUBMITTED IS TRUE AND CORRECT. BY THIS SIGNATURE; THE APPLICANT AGREES TO COMPLY WITH ALL APPLICABLE CODES AND CITY ORDINANCES.

**THIS APPLICATION SHALL EXPIRE:** PURSUANT TO SECTION 105.3.2 OF THE 2015 INTERNATIONAL BUILDING CODE APPLICATIONS FOR PERMIT WILL BE DEEMED ABANDONED 180 DAYS AFTER THE DATE OF FILING UNLESS THE APPLICATION HAS BEEN PURSUED IN GOOD FAITH OR A PERMIT HAS BEEN ISSUED.

**APPLICANT PRINTED NAME** \_\_\_\_\_ **DATE** \_\_\_\_\_

**APPLICANT SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

OFFICE USE ONLY			
<b>SIGN PMT #:</b> _____		<b>ELECT PMT #:</b> _____	
<b>FEES</b>		<b>BUSINESS #:</b> _____	
<b>SIGN PMT: \$</b> _____	<b>ELECT PMT: \$</b> _____	<b>LICENSE(S) #:</b> _____	<b>CONT ID:</b> _____
<b>PAST DUE LIC: \$</b> _____	<b>TOTAL AMOUNT DUE: \$</b> _____	<b>SIGN LICENSE FEES: \$</b> _____	<b>CONTR REG:</b> _____
		<b>NOTES:</b> _____	



# CITY OF BAYTOWN

Planning & Development Services

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## **SIGN PERMIT CHECKLIST**

Provide the following submittal documents as a single pdf file on a USB drive and two hard copies.

All documents shall be of sufficient quality and clarity to facilitate review.

- Completed Sign Permit Application and Electrical Permit Application if applicable.
- Existing Site Plan or Survey which includes all signs on the property.
- Proposed Site Plan or Survey showing all new signs and/or replacements.
- Provide plans that show the dimensions, material and required details of construction, including loads, stresses and anchors. (2015 IBC appendix H Section H105 Design and Construction).
- Provide documentation from a qualified Engineer delineating and describing methods of attachment which will meet the required wind speed of (150 MPH ultimate designed wind speed, V<sub>ULT</sub>), and will not adversely affect the structure or façade.