



COMMUNITY DEVELOPMENT DEPARTMENT
220 East Morris Avenue, Suite 200
South Salt Lake City, Utah 84115
(801) 483-6063 telephone
www.sslc.gov

SIGN PERMIT APPLICATION

CHECKLIST PRIOR TO SUBMITTAL

1. Complete Application & Affidavit
2. Nonrefundable fees
3. One paper copy of plans (11"x 17")
 - Provide a scaled site plan showing lot dimensions, length of property frontage, property lines, adjacent roads, public right of way, buildings, dimensions of the front of buildings, landscaped areas, points of ingress, parking areas. The location of the sign must be accurately depicted. All sign setbacks and clearview triangles must be shown.
 - Provide scaled building elevation(s) showing all building dimensions and exterior architectural elements. The location and size of the sign must be accurately depicted. All sign sizes, heights, illumination, etc. must be shown.
 - Provide complete construction plans for the proposed signage. The plans must depict the total square footage of sign, shape of sign, sign composition, color(s) and material(s) of the sign, illumination, heights and setbacks of the proposed signage.
 - Provide stamped structural calculations.
 - Provide mounting method documentation and/or footing diagrams and dimensions.
 - Any other applicable documentation requested by staff.
4. ONE digital copy of plans on (*emails in pdf format no flash drives*)
5. Location must have a current business license or pending application with SSL

**** INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED ****

PLAN RE-SUBMITTAL

1. Response letter stating where corrections were made to plans
2. One paper copies of plans (11" x 17") (Complete plans – No Single Pages)
3. ONE digital copy of updated complete plans

Submitting a sign permit application does not authorize the applicant to begin construction. Working without an approved permit violates South Salt Lake Municipal Code. South Salt Lake City reserves the right to pursue enforcement action including but not limited to Notice of Violation and Summons, and Citations.

Applicants are responsible for addressing and correcting all inaccurate or incomplete application documentation. Inactive applications automatically void after 180 days. All voided applications require submittal of new applications, including payment of all costs and fees. All application fees are nonrefundable.



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SIGN PERMIT APPLICATION

PERMIT NO. _____

APPLICATION DATE: _____

SIGN LOCATION ADDRESS: _____

FEE TITLE OWNER(S)

NAME: _____

MAILING ADDRESS: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

**** AFFIDAVIT REQUIRED FOR ALL PERMIT APPLICATIONS (SEE ATTACHED) ****

BUSINESS INFORMATION

BUSINESS NAME: _____

ADDRESS: _____ STATE: _____ ZIP: _____

SSLC BUSINESS LICENSE NUMBER: _____ PHONE: _____ EMAIL: _____

PRIMARY CONTACT:

NAME: _____

PHONE: _____ EMAIL: _____

COMPANY INSTALLING THE SIGN:

NAME: _____

STATE LICENSE NUMBER: _____ EXPIRATION DATE: _____

PHONE: _____ EMAIL: _____

TYPE OF SIGN:

QTY:	SIGN TYPES:	PERMIT COST:	QTY:	SIGN TYPES:	PERMIT COST:
	WALL SIGN	\$100.00		MONUMENT SIGN	\$200.00
	PROJECTING SIGN	\$100.00		DEVELOPMENT PYLON SIGN	\$200.00
	MARQUEE SIGN	\$100.00		DRIVE-THRU MENU SIGN	\$200.00
	AWNING SIGN	\$100.00		FREEWAY ORIENTED SIGN	\$200.00
	CANOPY MOUNTED SIGN	\$100.00		BILLBOARD	\$500.00
	ROOF SIGN	\$100.00		ELECTRONIC MESSAGE CENTER	\$500.00
	WINDOW SIGN	\$100.00		ALL SIGNS MUST COMPLY WITH TITLE 17	

VALUATION OF SIGN(S): _____

TOTAL PERMIT COST: _____

ACKNOWLEDGEMENT OF RESPONSIBILITY

This is to certify that I am making an application for the described action by the City and that I am responsible for complying with all City requirements with regard to this request. This application should be processed in my name, and I am the party with whom the City should communicate regarding any matter pertaining to this application.

The documents and/or information I have submitted are true and correct to the best of my knowledge. I understand that my application is not deemed complete until all application requirements have been met, including the payment of any applicable fees, deposits, and/or bonds.

SIGNATURE OF APPLICANT: _____

NAME OF APPLICANT (PRINTED): _____

MAILING ADDRESS: _____

PHONE #: _____ EMAIL: _____

FOR CITY USE ONLY

Total Fees Due: _____ Receipt #: _____

Date Paid: _____

CITY REVIEW NOTES:

ZONING DISTRICT:

TITLE 17 MATRIX:

SIGN TYPE DEFINITION: _____

PERMITTED SIGN TYPE _____

PROHIBITED SIGN TYPE _____

TITLE 17 SIGN CODE COMPLIANCE REVIEW:

TOTAL ALLOWED SIGN AREA _____

TOTAL PROPOSED SIGN AREA _____

MAXIMUM ALLOWED HEIGHT _____

PROPOSAL SIGNAGE HEIGHT _____

NUMBER OF EXISTING SIGNS PER FAÇADE _____

PROPOSED SIGNS PER FAÇADE _____

SIGN SEPARATION & QUANTITY COMPLIANCE _____

ILLUMINATION COMPLIANCE _____

MATERIALS COMPLIANCE _____

SETBACK AND CLEARVIEW COMPLIANCE _____

IS THE USE NONCONFORMING? _____

IS THE BUILDING NONCOMPLYING? _____

DOES THE PROPOSAL COMPLY WITH
NONCONFORMING REQUIREMENTS? _____

IS THIS A CHANGE OF USE? _____

DOES THIS BUSINESS TYPE OF ADDITIONAL
RESTRICTIONS? _____

ACTIVE BUSINESS LICENSE NAME:

ACCOUNT #:

CURRENT ON RENEWAL PAYMENTS:

YES _____ NO _____

APPROVED [] DENIED []

DATE:

PLANNER NAME:

PROPERTY OWNER'S AFFIDAVIT for property located at

Address: _____

Project Name / Business Name: _____

PROPERTY OWNER

I/we _____, being duly sworn, depose and say that I/we am/are the current owner(s) of the property identified in this application and that I/we have read the application and attached exhibits and are familiar with its contents; and that said contents are in all respects true and correct based upon my personal knowledge.

Owner's Signature

Owner's Signature (co-owner if applicable)

On the _____ day of _____, 20 ___, personally appeared before me _____ the signers(s) of the above Agent Authorization who duly acknowledged to me that they executed the same.

Notary Public
Residing in Salt Lake County, Utah
My Commission expires: _____

AGENT AUTHORIZATION

I/we, _____, the owner(s) of the real property described above, do hereby appoint my/our agent _____ to represent me/us with regard to this application affecting the above described real property located in the City of South Salt Lake, and to appear on my/our behalf before any City Board or Commission considering this application.

Owner's Signature

Owner's Signature (co-owner if applicable)

On the _____ day of _____, 20 ___, personally appeared before me _____ the signers(s) of the above Agent Authorization who duly acknowledged to me that they executed the same.

Notary Public
Residing in Salt Lake County, Utah
My Commission expires: _____