



TOWN OF HAMDEN
BUILDING DEPARTMENT
 Hamden Government Center
 2750 Dixwell Avenue
 Hamden, CT 06518
 Tel: (203) 287-7160

APPLICATION FOR SIGN PERMIT

Permit No.	TAX COLLECTOR:	ZONING []	Date:
Sign Location/Address			
Owner's Name:			
Owner's Street Address:			
Town:	State:	Zip:	
Area Code & Home Ph. No.	Work Ph. No.	Fax:	
Contractor Name:			
Address:	Town:	State:	Zip:
Phone No.	Work Phone:	Fax:	
Engineer Name:	Lic #	Estimated Cost: \$	
<p>Engineering is required and shall indicate details of construction, wind loads, stresses, and anchorage. Projecting signs, which extend more than 15 inches from the face of the wall, shall indicate additional loads.</p>			
Describe The Sign To Be Installed			
Roof [] *Wall [] *Ground [] Open [] Closed [] *Projecting [] Marquee []			
Sq. Ft.	Height above grade	Illuminated signs require an electrical permit	
Wood [] Metal [] Plastic [] Glass [] Combination []			
Identification: Every sign shall be I.D. with name of person, firm or Corp. owning, erecting and maintaining			
* Wall sign permits are not required for signs less than 10 sq. ft. in area and which are not illuminated			
*Projecting sign permits are not required for signs less than 2.5 sq. ft. of display surface			
*Ground signs less then 10 sq. ft. and not more than 6 ft. above grade (see note)			
<p>I certify that I am the owner of record of the named property or that the proposed work is authorized by the owner of record and/or I have been authorized to make this application as an authorized agent, we agree to conform to all applicable laws, regulations and ordinances. All information contained within is true and accurate to the best of my knowledge and belief.</p>			
Printed Name of Owner or Lessee _____			
Signature of Owner or Lessee is Required _____			
Printed Name of Authorized Agent _____			
Signature of Authorized Agent _____			