



City of Camarillo

Department of Community Development

SUBDIVISION SIGN PERMIT

Application

SUBMITTAL	City of Camarillo Department of Community Development 601 Carmen Drive P.O. Box 248 Camarillo, CA 93011-0248 Phone: 805.388.5360; Fax: 805.388.5388 Email: comdevemail@cityofcamarillo.org	APPLICATION <small>Staff Use</small>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"><u>Sign</u></td> <td style="width: 15%;"><u>Number</u></td> <td style="width: 15%;"><u>Fee</u></td> <td style="width: 15%;"><u>Sign Removal</u></td> <td style="width: 15%;"><u>Security</u></td> </tr> <tr> <td>Subdivision</td> <td>S- _____</td> <td>\$ _____</td> <td></td> <td></td> </tr> <tr> <td>Directional</td> <td>S- _____</td> <td>\$ _____</td> <td></td> <td></td> </tr> <tr> <td>Received by</td> <td colspan="4">_____</td> </tr> <tr> <td>Date Filed</td> <td colspan="4">_____</td> </tr> <tr> <td>HTE No.</td> <td colspan="4">_____</td> </tr> </table> <p style="text-align: right; font-size: small;"><i>(Keep Receipt with Application)</i></p>	<u>Sign</u>	<u>Number</u>	<u>Fee</u>	<u>Sign Removal</u>	<u>Security</u>	Subdivision	S- _____	\$ _____			Directional	S- _____	\$ _____			Received by	_____				Date Filed	_____				HTE No.	_____			
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NOTE Prior to submittal of the application, it is advised that the applicant review the requested proposal with the Department of Community Development in order to review Ordinance requirements and consistency with the master sign programs. In completing the application form, please be accurate and complete. If you have any questions or require assistance, contact the Department of Community Development. **A sign permit is required prior to the painting or manufacturing of a sign.**

APPLICANT	<p>DEVELOPER _____ Contact Person _____</p> <p>Email (required) _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Phone (8 am – 5 pm) _____ Cell _____ Fax _____</p> <hr/> <p>SIGN INSTALLER _____ Contact Person _____</p> <p>Email (required) _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Phone (8 am – 5 pm) _____ Cell _____ Fax _____</p> <hr/> <p>PROPERTY OWNER _____ Contact Person _____</p> <p>Email (required) _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Phone (8 am – 5 pm) _____ Cell _____ Fax _____</p>
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REQUEST	Sign advertising or directing to Tract # _____ Project Name _____ Sign will be <input type="checkbox"/> Single-faced; <input type="checkbox"/> Double-faced; <input type="checkbox"/> On-site; or <input type="checkbox"/> Directional Dimensions _____ Height _____ Sq. ft. _____ # of lots in tract _____ Location of sign: Lot _____ Tract # _____ Present use of property _____ Zoning _____ Nearest cross street(s) _____
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DESCRIPTION	Describe sign (include colors, materials and letter style) _____ _____ _____ _____
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EXISTING	Location of all other signs pertaining to this particular subdivision: 1. _____ 2. _____ 3. _____
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EXHIBIT

Please use the space below to draw the following:

1. Dimensioned plot plan of property to include proposed sign and its location, location and dimensions of all existing signs and buildings.
2. Dimensional drawing of the proposed sign.
3. Please use ruler for drawing.
4. Drawing needs to be accurate and complete.

CERTIFICATION

Developer:

I hereby apply for the subject subdivision sign permit and certify that the information presented is accurate and complete. I also understand and agree to abide by the regulations and conditions of the Sign Ordinance attached to this permit. Furthermore, I understand that the permit may be revoked if the provisions of this permit are not complied with at all times.

Developer Name

Date

Signed by

Print Name Here

Title

SUBDIVISION SIGN PERMIT

RELEASE	<p>I, the <u>undersigned</u> understand and agree that upon approval of the subdivision sign permit, the City may enter the property and remove said sign at my expense if the sign is up after its expiration date, and I further agree to defend and indemnify and hold harmless the City for any damage or claims of damage arising from its action.</p>
	<p>_____</p> <p>Property Owner Signature Date</p>
	<p>_____</p> <p>Print Name Here</p>

CITY STAFF USE	<p>Subdivision Sign No. <u>S - _____</u> Tract No. _____</p>
	<p style="text-align: center;">AUTHORIZATION: <input type="checkbox"/> APPROVED / <input type="checkbox"/> DENIED</p> <p>Sign approval is subject to the following conditions:</p> <ol style="list-style-type: none">1. The permit is granted for a period of two (2) years, or ninety percent (90%) of completion of sales, and expires on _____.2. The sign location and dimension shall be as shown on plot and elevation plans.3. The lower right hand corner of the sign must contain the following identification Number <u>S- _____</u> in letters of ½ inch brush stroke not less than 3 inches in height.4. The sign shall be _____ in size and <input type="checkbox"/> single-faced / <input type="checkbox"/> double-faced.5. The sign shall be unlighted.6. No streamers, flags or appurtenances shall be attached to said sign.7. If street widening necessitates removal of sign, applicant will relocate when and as requested at his own expense.8. The sign shall be used only to <input type="checkbox"/> advertise / <input type="checkbox"/> direct to subdivision Tract _____.9. The sign shall not be installed until a certificate of deposit/passbook for Two Hundred and Fifty dollars (\$250.00) has been filed with and accepted by the City. In case of failure to perform or comply with any term or provision of the permit, the Director of Community Development may declare the security forfeited. Upon expiration of the permit or upon removal of the subject use, the security may be used by the Community Development Department to cause the removal of the sign.10. _____ _____ <p style="text-align: right;">_____ Director of Community Development</p> <p style="text-align: right;">_____ Date</p>

<p>Copy sent / Given to _____ Staff Initials _____ Date _____</p>
