



TOWN OF BRENTWOOD SIGN PERMIT

Site Location (street address): _____

Owner Name: _____ Phone: _____

Owner Address: _____

Name of Business: _____

Business Address: _____

Business Phone #: _____

Tax Map

Lot

SIGN TYPE

- | | | | | | | | |
|------------------|--------------------------|----------------|--------------------------|--------------|--------------------------|--------------------|--------------------------|
| New Sign | <input type="checkbox"/> | Relocated Sign | <input type="checkbox"/> | Face Replace | <input type="checkbox"/> | Single Faced | <input type="checkbox"/> |
| Replacement Sign | <input type="checkbox"/> | Free Standing | <input type="checkbox"/> | Wall Sign | <input type="checkbox"/> | Double Faced | <input type="checkbox"/> |
| Temporary Sign | <input type="checkbox"/> | Projecting | <input type="checkbox"/> | Window Sign | <input type="checkbox"/> | In Home Occupation | <input type="checkbox"/> |
| Directory Board | <input type="checkbox"/> | | | | | | |

Fee

LIGHTING

- | | | | | | |
|-----------------|--------------------------|-----------------------|--------------------------|-----------------------|--------------------------|
| Non-Illuminated | <input type="checkbox"/> | Internal Illumination | <input type="checkbox"/> | External Illumination | <input type="checkbox"/> |
|-----------------|--------------------------|-----------------------|--------------------------|-----------------------|--------------------------|

SIZE

Total Square Footage of Proposed Sign: _____ Dimensions: _____

Estimated Cost: \$ _____

Note: A check made payable to the "Town of Brentwood" must be submitted with the application. Application fee is \$50.00 minimum. Any balance due must be paid prior to the permit being released to the applicant.

Please attach a drawing showing the size, location, overall height when mounted, and full text. For freestanding signs, indicate the setbacks to property lines. 603 642 6400 ext 18 or E Mail kkaiser@brentwoodnh.gov

Signature of Applicant

Permit Approved:

Building Inspector

Date: _____ Permit # _____

Selectmen