



CITY OF LINCOLN
 150 MAGNOLIA STREET
 P.O. Box 172 LINCOLN, AL 35096

BUILDING DEPARTMENT

PERMIT # _____
 CICT FEE _____
 PERMIT FEE _____
 TOTAL FEE _____

SIGN PERMIT APPLICATION

Project Address: _____

(Street) (City) (ST) (Zip)

Freestanding Sign(s) **New** **Reface**

Sign Face Dimensions	Area (sqft)	Height	Monument or Elevated

Building Sign(s) **New** **Reface**

Sign Face Dimensions	Area (sqft)	Sign Type (Open Letter, Cabinet, etc.)

Gross Job Cost: \$ _____

CONTRACTOR INFORMATION

Company Name: _____ **Company Owner:** _____

Address: _____
 (Street) (City) (ST) (Zip)

Phone #: _____ **E-mail Address:** _____

Alabama General Contractor License #: _____ **City License#:** _____

PROPERTY OWNER INFORMATION

Name: _____

Address: _____
 (Street) (City) (ST) (Zip)

Phone: _____

DIMENSIONED DRAWINGS OF ALL PROPOSED SIGNS MUST BE ATTACHED TO THIS APPLICATION.

All permit fees will be due at the time you collect your permit.

NOTE TO APPLICANT: Applications will not be processed until all required information is provided and applicant signs application.

I certify that the above information given is correct to the best of my knowledge and work authorized upon this application is to be done in accordance with all City of Lincoln Ordinances.

Applicant (Print)

Signature of Applicant

Date