



TEMPORARY SIGNS

Application for Temporary Signs

BUSINESS AND DEVELOPMENT SERVICES

5 EAST BUTLER ROAD

MAULDIN • SOUTH CAROLINA 29662

WWW.CITYOFMAULDIN.ORG • (864) 234-3475

APPLICATION SUBMITTAL DATE:	PERMIT NUMBER:
------------------------------------	-----------------------

PROJECT LOCATION		PARCEL ID #:		
Street Address:	Unit / Suite:	City:	State:	Zip:
Name of Business/Lessee:		Shopping Center / Development Name:		
Property Owner Name:		New Owner: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Mailing Address:		City:	State:	Zip:
Business Phone Number: () -	Mobile Phone Number: () -	Other:		
Applicant Email Address:	Owner Email Address:	Other Email:		

<input type="checkbox"/>	TEMPORARY DISPLAYS	Plans Required
(SIGN ORDINANCE, SECTION 6:11.12-B.(4) Two (2) Copies of a Sign Dimension Plan including a Survey or Site Plan in each set		
Project Information: <input type="checkbox"/> Single Tenant <input type="checkbox"/> Multi-Tenant (Shopping Center)		
Select a SIGN TYPE from below and provide the size / dimensions of sign:		
<input type="checkbox"/> Wall Mounted	Size/Dimensions:	<input type="checkbox"/> Ground Sign
Select Type of Sign Display:		
<input type="checkbox"/> A-frame <input type="checkbox"/> Banner <input type="checkbox"/> Corrugated <input type="checkbox"/> Other:		
Provide a Description of How Sign will be attached to the wall or If ground mounted Describe the Support Structure:		

TEMPORARY ADVERTISING PERIODS				Allowance: Two (2), Fourteen (14) day periods per quarter each year			
QUARTER 1: Jan, Feb, March		QUARTER TWO: April, May, June		QUARTER 3: July, Aug, Sept		QUARTER 4: Oct, Nov, Dec	
PERIOD 1:		PERIOD 1:		PERIOD 1:		PERIOD 1:	
Display Date:	Removal Date:	Display Date:	Removal Date:	Display Date:	Removal Date:	Display Date:	Removal Date:
PERIOD 2:		PERIOD 2:		PERIOD 2:		PERIOD 2:	
Display Date:	Removal Date:	Display Date:	Removal Date:	Display Date:	Removal Date:	Display Date:	Removal Date:

<input type="checkbox"/>	Grand Opening (SIGN ORDINANCE, SECTION 6:11.12 B.(2))	Plans Required Two (2) Copies of a Survey or Site Plan plus a Sign Dimension plan- Two (2) Temporary signs are permitted, plus up ten (10) displays
Project Information: <input type="checkbox"/> Single Tenant <input type="checkbox"/> Multi-Tenant (Shopping Center)		
Select a SIGN TYPE from below and provide the size / dimensions of sign:		
<input type="checkbox"/> Wall Mounted - Size/Dimensions:	<input type="checkbox"/> Ground Sign - Size/Dimensions:	Height:
Select Type of Sign Display:		
<input type="checkbox"/> A-frame <input type="checkbox"/> Banner <input type="checkbox"/> Corrugated <input type="checkbox"/> Other:		
LIST ADDITIONAL DISPLAYS (Streamers, Balloons, Pennants):		

<input type="checkbox"/>	Seasonal Sales (SIGN ORDINANCE, SECTION 6:11.12 B.(5))	Plans Required Two (2) Copies of a Survey or Site Plan plus a Sign Dimension plan					
Temporary Sign Type and Size of Sign:							
<input type="checkbox"/> Ground Sign - Size/Dimensions:	Height:						
Select Type of Sign Display:							
<input type="checkbox"/> A-frame <input type="checkbox"/> Banner <input type="checkbox"/> Corrugated <input type="checkbox"/> Other:							
Garden Sales 60 Days or 2 - 30 days	Produce Stand 90 Days or 2 - 45 days	Pumpkin Sales 30 Days	Christmas Tree Sales 45 Days				
Display Date:	Removal Date:	Display Date:	Removal Date:	Display Date:	Removal Date:	Display Date:	Removal Date:

<input type="checkbox"/>	Banner in Lieu of Permanent Sign (SIGN ORDINANCE, SECTION 6:11.12 B(3))	Plans Required Two (2) Copies of a Survey or Site Plan plus Sign Dimension plan – Permitted for sixty (60) days
Project Information: <input type="checkbox"/> Single Tenant <input type="checkbox"/> Multi-Tenant (Shopping Center)		
Select a Temporary Sign Type and Provide the Size of the Sign:		
<input type="checkbox"/> Wall Mounted - Size/Dimensions:	or	<input type="checkbox"/> Ground Sign - Size/Dimensions:
		Height:
Display Date:	Removal Date:	

PERMITS REQUESTED /FEES

Permits Requested	Associated Permit #	Contractor Business Name	State License Number	Cost of Work	Permit Fees
<input type="checkbox"/> Sign				\$	\$
			Total Project Cost	\$	\$
				ADDITIONAL FEES	
				Plan Review	\$
				Zoning	\$
				Flood	\$
				Other	\$
				Total Fee	\$

SIGNATURES

I hereby certify that all information in this application is correct and all work will comply with the South Carolina State Building Code and all other applicable state and local laws. The Business and Development Services Department will be notified of any changes in the approved plans or specifications for the project as permitted.

Owner/Agent Signature:	Company Name:		
	Address:		
	City:	State:	Zip:
Printed Name:	Phone Number: () -		Fax Number: () -
	Email Address:		

