

TOWN OF HARWICH



Date _____
Pymt Type _____
Rec'd by _____

Building Department

732 Main Street
Harwich, MA 02645

Telephone: (508) 430-7506

Fax: (508) 432-4703

\$50.00 FEE (per sign)

PERMIT NO.

APPLICATION FOR SIGN PERMIT

Applicant _____ Address _____

Telephone _____ Business Name _____

Property Owner _____ Map/Parcel # _____

Address of Sign Location _____ Zone _____

Size Of Sign _____ total sq. footage Type Of Material _____

Lettering Color _____ Background Color _____

Wall Sign _____ Free-Standing (Ground Sign) _____

Lighting (If Any) _____ Height of Sign _____

Attach a scale drawing of the sign and its location on property, including if mounted on building, and show the size and location of any existing signs. Mock-ups and photos will be accepted.

- NOTE:
1. The Architectural Advisory Board requires submission of color samples.
 2. Your attendance at the hearing would be advisable and helpful.
 3. Multiple Business/Master Sign Plan/Planning Board approval may be required.

Signature of Applicant _____ Date _____

Approved By _____ Date _____
Building Dept.

Approved By _____ Date _____
Planning Dept.

COMMENTS:

THIS FORM IS TO BE SUBMITTED IN DUPLICATE.