CHARLES COUNTY GOVERNMENT
Department of Planning & Growth Management
P.O. Box 2150 · La Plata, MD 20646
www..charlescounty.org
Maryland Relay Service: 7-1-1 · TDD: 1-800-735-2258

BUILDING & ZONING SIGN PERMIT APPLICATION

Name of Applicant:	Phone:	Date:
Mailing Address:		
E-Mail Address:		

Address of Proposed Sign:		Subdivision name:		
Zoning of property:	Property ID #:	Tax Map:	Parcel:	Lot:
Road Classification:		Gross Floor Area of building/lease space:		

****Without the Gross Floor Area of the building/lease space the application cannot be processed**

Name of Property Owner:	Phone:
Address of Property Owner:	
E-Mail Address:	

Name of Contractor:	Phone:	License #:
Mailing Address:		
E-Mail Address:		

Type of work: New sign **Circle all that applies**	Replacement sign	Reface or alter sign

Type of Sign: **Circle all that applies**	Building Sign Temporary Real Estate Signs	Freestanding Sign Temporary Event Signs
Lighted (Y/N)	If yes, type of lighting?	Value of sign(s): $

Total square footage of **proposed** building sign(s)	Total square footage of **existing** building signs to remain
Total square footage of **proposed** freestanding sign	Total height of proposed freestanding sign

Submission Checklist

____ Three (3) copies of the site plan ____ Three (3) copies of the sketch of the sign(s)

____ Planning Design Review Board (PDRB) approval ____ Application fee

I hereby certify that I have read the instructions and the information provided is correct to the best of my knowledge and belief.

Signature of applicant:_____ Date:_____