MASTER SIGN PLAN APPLICATION
Fee: $200.00

City of New Bern

Greg McCoy
(252) 639-7585
mccoyg@newbern-nc.org
Fax: (252) 636-2146

Development _____
Address _____ Phone _____

Owner/Agent _____
Address _____ Phone _____
Fax: _____ Email: _____

Lot area _____ Primary frontage _____ Secondary frontage _____
Building frontage _____ (attach site plan including building and lot dimensions)

Signage Analysis Chart (continue on back if necessary)

Tenant	Store Frontage	Max. Allow. Signage	Existing Signage	Date Permit Issued
Total				

I certify that the information provided is true and complete to the best of my knowledge.

_____ _____
Owner/Agent Date

Approved ❒ Denied ❒

Staff Comments: _____

_____

_____

_____ _____
ZONING ENFORCEMENT OFFICER DATE

Signage Analysis Chart (Continued)				
Tenant	Store Frontage	Max. Allow. Signage	Existing Signage	Date Permit Issued
Total				