City of Chatsworth

Building and Codes Enforcement Department

PO Box 516
Chatsworth, GA 30705

chatsbuildinsp@windstream.net

Phone (706)695-3640

Sign Permit Application

Application Date _____

Section I Identification

Applicant Name:

Last First Phone

Address:

Street City State Zip

Owner Name:

Last First Phone

Address:

Street City State Zip

Section II Contractor Information

Sign Contractor/ Company Phone#

Address:

Street City State Zip

E-Mail Cell Phone

Section III Signage Information

Location of Proposed Sign | Zoning District

Type of Sign

☐	Free Standing Sign	Square Footage of Sign Area		Setback
☐	Bill Board Sign	Square Footage of Sign Area		Setback
☐	Wall Sign/Canopy Sign	Square Footage of Sign Area		
☐	Wall Sign/Canopy Sign	Square Footage of Sign Area		
☐	Wall Sign/Canopy Sign	Square Footage of Sign Area		
☐	Wall Sign/Canopy Sign	Square Footage of Sign Area		

☐ Instructional/Directional

Number of Signs

Illuminated Signs may require Electrical Permit

I,_____, agree that I will conform to all applicable laws and Ordinances of the City of Chatsworth and the State of Georgia as they relate to the proposed activitey.

Approved By:	DATE	Permit Fee $
Fee Received By:	DATE	Receipt #