PROCEDURE TO OBTAIN SIGN PERMIT

1. OBTAIN SIGN PERMIT APPLICATION FROM THE PLANNING DEPARTMENT. APPLICANT MAY REQUEST SIGN REGULATION INFORMATION FOR THEIR SPECIFIC PROPERTY ADDRESS.

2. RETURN COMPLETED ZONING PERMIT APPLICATION WITH REQUIRED BASIC SKETCH OF SIGN DIMENSION, DESIGN AND LOCATION TO THE PLANNING DEPARTMENT.

3. ZONING PERMIT APPLICATION WILL BE REVIEWED BY PLANNING DEPARTMENT STAFF TO VERIFY ZONING REGULATION COMPLIANCE. ZONING PERMIT APPLICATION IS THEN FORWARDED TO THE TOWN BEAUTIFICATION COMMITTEE (TBC) FOR THEIR ADVISORY OPINION.


6. WHEN PROPOSED SIGNAGE HAS BEEN DETERMINED BY PLANNING DEPARTMENT STAFF TO COMPLY WITH THE TOWN OF CHESHIRE ZONING REGULATIONS, THE ZONING PERMIT APPLICATION WILL BE FORWARDED TO THE BUILDING DEPARTMENT.

7. APPLICANT WILL RECEIVE PHONE CALL FROM THE BUILDING DEPARTMENT WHEN THE PERMIT IS SIGNED AND READY FOR PICK UP.

8. FEE WILL BE PAID TO THE BUILDING DEPARTMENT WHEN APPLICANT PICKS UP PERMIT.
SIGN LOCATION

During the required sign permit process, care must be taken in the placement of the sign. The following regulations are specific to the location of signs:

SETBACKS: Section 34, Paragraph 4, Subsection 3
All signs must be set back no less than ten (10) feet from the street line or property line. If the configuration of the road subsequently changes, the sign shall be moved to conform with these setback requirements. This distance may be increased if the Cheshire Traffic Authority determines that a sign's placement presents a sight line or traffic safety problem.

OBSTRUCTIONS: Section 34, Paragraph 4, Subsection 4
No sign shall be located or maintained so as to be a hazard to traffic or pedestrians, to obstruct any door, window, ventilation system, or fire escape exit or to cause any other hazard to public health and safety.

FENCES, WALLS AND HEDGES: Section 32, Paragraph 6
Nothing shall be erected, placed, planted, sloped, bermed or allowed to grow in such a manner as to materially impede pedestrian, bicycle or vehicle traffic visibility. Visibility shall be determined with reference to the State of Connecticut Department of Transportation Guidelines for Highway Design. (See Table 32.5.A, Intersection Sight Distance Criteria, and Figure 32.5.B Intersection Sight Distance “ISD”). Unless existing conditions create a hardship, the desirable ISD shall be used, and in no case shall the ISD be less than the minimum in the table. Fences shall not be over eight (8) feet in height anywhere on the property.

If you have questions regarding these regulations you may contact the Planning and Zoning office at 271-6670 for further clarification. Additionally, if you are unclear in the determination of the sight line at your location relative to the zoning regulations, you may contact Traffic Officer Dave Kehoss at 271-5541 and request a sightline inspection.
APPLICATION FOR SIGN PERMIT REVIEW

DATE_________________________

ZONE_________________________

(For office use only)

NAME OF BUSINESS_____________________________________________________

LOCATION OF BUSINESS__________________________________________________

CONTACT PERSON________________________________________________________

ADDRESS OF CONTACT PERSON____________________________________________

PHONE NO. FOR CONTACT PERSON__________________________________________

TYPE OF SIGN – Freestanding, Wall Sign*, Etc.________________________________

*For Wall Signs, see Wall Sign Application.

COLOR (S) TO BE USED______________________________________________________

SIGN CONSTRUCTED OF:_____________________________________________________

WILL THE SIGN BE ILLUMINATED?__________________________________________

IF SO, HOW? (Internal, Ground, Etc.)________________________________________

DIMENSIONS OF SIGN_______________________________________________________

______________________ X ____________________ = ______________________

(Feet) (Feet) (Square Feet)

LOCATION OF SIGN_______________________________________________________

SIGNATURE OF APPLICANT__________________________________________________

SIGNATURE OF PROPERTY OWNER____________________________________________

TBC COMMENTS_____________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
WALL SIGN WORKSHEET

Current Town of Cheshire zoning regulations require that wall signs do not exceed 5% of the wall or unit face to which they are attached. In order to determine the percentage of the wall sign, the following calculations must be completed.

**Calculate Wall Size**

Buildings with single tenant use: calculate wall face where the wall sign is to be attached.

Buildings with multi-tenant use: calculate unit face where the wall sign is to be attached.

\[
\text{Height} \times \text{Width (in feet)} = \text{square feet}
\]

**Calculate 5% Of Wall Size**

\[
\text{Wall size} \times .05 \text{ (in feet)} = \text{square feet}
\]

**Calculate Wall Sign Size**

\[
\text{Height} \times \text{Width (in feet)} = \text{square feet}
\]

Wall sign size must not exceed 5% of the wall or unit size.
NO._________________________ DATE:______________________

PERMISSION TO:  (BUILD) (MAKE ALTERATIONS TO)

A________________________ COMMERCIAL OR INDUSTRIAL, OR OTHER________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

DESCRIPTION OF PREMISES:  ZONE____________

VALUE OF SIGN: $________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

PROPOSED SIGNS MEET APPLICABLE SIZE, HEIGHT AND SETBACK
REQUIREMENTS OF THE CHESHIRE ZONING REGULATIONS

YES ( )  NO ( ) __________________________

Initials of Applicant

APPLICANT: I hereby certify that the
information contained herein is
accurate.

_______________________________
Signature of Applicant

_______________________________
Name of Applicant (Print)

GRANTED:

____________________________________
Address

____________________________________
Zoning Enforcement Officer Telephone No.

******************************************************************************

THIS APPROVAL IS SUBJECT TO COMPLIANCE (PRIOR TO INSTALLATION) WITH THE
PROVISIONS OF THE ZONING REGULATIONS, OF THE TOWN OF CHESHIRE AND AS
AUTHORIZED UNDER 8-3f OF THE CONNECTICUT GENERAL STATUTES, AS AMENDED.
SITE ADDRESS: ____________________________________________________________

OWNER OF LAND: _________________________________________________________

INTERIOR OR CORNER LOT: ___________________________ ZONE: __________

DESIGN, DIMENSIONS AND SITE LOCATIONS OF ALL SIGNS

INFORMATION SUPPLIED BY:

NAME (Print)