

**CITY OF NEWBERRY**  
**P.O. Box 538 - 1330 College St.**  
**Newberry, SC 29108**  
**803-321-1019 (office) - 803-321-2609 (fax)**

**SIGNAGE PERMIT APPLICATION**

**DATE** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**Owner/Business Name:** \_\_\_\_\_

**Address** (if different from above): \_\_\_\_\_

**Use:** Residential \_\_\_\_ Commercial \_\_\_\_ **Project Cost (contract amt.):** \_\_\_\_\_

(Note: Any signage proposed for installation within the Historic District of the City of Newberry must be reviewed and approved by the Architectural Review Board before a permit can be issued.)

**Brief description of job:** \_\_\_\_\_

\_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Business License number:** \_\_\_\_\_

By signing this application, I certify that I am an authorized agent for the Company performing the work stated above and that all information provided is true. I further understand that if any information provided is found to be incorrect or falsely stated that this permit will be null and void and that I may be responsible for violations of other related state laws and local ordinances.

**Contact Name:** \_\_\_\_\_ **Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**RESIDENTIAL PROPERTY OWNERS DOING THEIR OWN WORK:** Homeowner exemption form must be completed, and Disclosure Statement filed with the county register of deeds. All persons hired to perform work must be properly licensed by the SC Department of LLR and have a current City of Newberry business license. Violation of any part of this agreement shall void all permits.

Signed: Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_