

Name:

Address:

<u>APPLICATION</u>

Town of Goldston, NC

OFF-PREMISE DIRECTIONAL SIGN Central Pines Regional Council Planning Department 4307 Emperor Blvd, Suite 110 Durham, NC 27703 Ph: (919) 503-3431

Applicant Information Contact No. () City: State/Zip:

Off-Premise Directional Sign Requirements

Please check each box to ensure you are providing all necessary documentation in order for this application to be processed. Failure to provide any required information will produce a denial of the application request.

- Off-premise directional signs are permitted in any zoning district provided no sign is larger than 32 square feet and no part of the sign is higher than eight (8) feet above the ground at its base.
- Three off-premise directional signs are allowed per business, church, park, historic property, school, or other place of assembly.
- Only one (1) off-premise directional sign is permitted per property; however multiple uses are allowed to be identified on the sign.

The square footage of the off-premise directional sign shall not be counted against the square footage of other signs allowed on the property. Written permission from the owner(s) of the property where the sign is proposed to be located is required to be submitted with the sign permit application. Verification from the North Carolina Department of Transportation that the sign will not be in violation of any State regulations at its proposed location must be submitted with the sign permit application. **Locations of Off-Premise Directional Sign/s** Located on PARCEL No.:___ NCDOT verification/authorization attached? ☐ Yes Sign No. 1: Signed Permission Attached? ☐ Yes Property Owner Name: Property Owner Mailing Address:______ City/State/Zip:___ ____ Sign Height from Ground Level__ Sign Area Square Feet What is the name of the Business/Organization sign will be directing traffic for?___ Located on PARCEL No.:____ NCDOT verification/authorization attached? ☐ Yes Signed Permission Attached? ☐ Yes Property Owner Name: _____ City/State/Zip:___ Property Owner Mailing Address:____ _____Sign Height from Ground Level_ Sign Area Square Feet___ What is the name of the Business/Organization sign will be directing traffic for?_ Sign No. 3: Located on PARCEL No.:___ NCDOT verification/authorization attached? ☐ Yes Property Owner Name:____ Signed Permission Attached? Yes __ City/State/Zip:___ Property Owner Mailing Address:_____ ___ Sign Height from Ground Level_ Sign Area Square Feet What is the name of the Business/Organization sign will be directing traffic for?___ **Statement of Acceptance** By signing this application, I state that I understand and agree to the rules and regulations described herein and agree to comply as required. Should I not maintain compliance with this regulation, I understand any and all signs described herein, or that have been unlawfully placed, may be removed by the Town or County designee or NCDOT as deemed necessary. I also understand the Town nor the County are not liable for damages, theft, or removal of any sign outside of their control. Applicant Signature: _____ Printed:___ OFFICE USE ONLY

_____ Date Approved ___ ___ Date Rcv'd ___ Application No. PL

Application Fee: \$ Method of Payment \(\Boxed{Cash} \) Credit Card \(\Boxed{Check No.} \)

Approved By: _

*In keeping with the North Carolina Records Law, applications, emails, and all other methods of correspondence related to this application, may be released to others upon request for inspection and/or copying.