



# BALDWIN COUNTY COMMISSION

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## PLANNING AND ZONING DEPARTMENT

**Main Office**  
22251 Palmer Street  
Robertsdale, AL 36567  
Phone: (251) 580-1655  
Fax: (251) 580-1656

**Foley Office**  
201 East Section Avenue  
Foley, AL 36535  
Phone: (251) 972-8523  
Fax: (251) 972-8520

### Sign Application Submittal Checklist

\_\_\_\_\_ **Baldwin County Sign Application**

\_\_\_\_\_ Application Fee (*see current fee schedule*)

\_\_\_\_\_ Agent Authorization Form (*if person other than property owner is applying*)

\_\_\_\_\_ Plot Plan or Survey – indicating the proposed location of the sign to be erected and the setbacks from property lines.

\_\_\_\_\_ Plans and Specifications must include the following information:

- Lot frontage on all street rights-of-way.
- Façade area of any wall on which a sign is proposed to be placed.
- Dimensions of the sign's supporting members.
- Maximum and minimum height of sign, as measured from finished grade.
- Dimensions and elevations (including the message) of the sign.
- Location of the sign in relation to property lines, public rights-of-way, easements, buildings and other signs on the property.
- For illuminated signs, the type placement, intensity and hours of illumination.
- Construction and electrical specifications, to enable determination that the sign meets all applicable structural and electrical requirements of the building code.
- Value of the proposed sign.
- Number, type, location and surface area of all existing signs on the same property and/or building on which the sign is to be located.

\_\_\_\_\_ Any other information deemed necessary to complete review

Case No. \_\_\_\_\_ Accepted By: \_\_\_\_\_ Date: \_\_\_\_\_

Application Fee: \_\_\_\_\_  Paid

# Sign Application

22251 Palmer Street  
Robertsdale, AL 36567  
Phone: (251) 580-1655 Fax: (251) 580-1656

## Applicant

Are you the property owner?  yes  no  
(If you are not the property owner you must submit Owner Authorization Form signed by the property owner)

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code \_\_\_\_\_ - \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ e-mail: \_\_\_\_\_

## Site Information

Parcel ID Number: 05-\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ . \_\_\_\_

Physical Address (E-911): \_\_\_\_\_

Subdivision/Lot/Unit No: \_\_\_\_\_

## Plans and Specifications

**Plans and Specifications for any proposed sign shall be submitted in duplicate, drawn to scale and should also show the following:**

Lot Frontage on all street rights-of-ways: \_\_\_\_\_

Facade area of any wall on which a sign is proposed to be placed: \_\_\_\_\_

Dimensions of the sign's supporting members: \_\_\_\_\_

Maximum and Minimum height of sign (as measured from finished grade): \_\_\_\_\_

Dimensions and elevations (including message) of the sign: \_\_\_\_\_

Location of the sign in relation to:

Property lines \_\_\_\_\_ Public rights-of-ways \_\_\_\_\_

Easements \_\_\_\_\_ Buildings \_\_\_\_\_

Other signs on the property \_\_\_\_\_



For illuminated signs: Type \_\_\_\_\_ Placement \_\_\_\_\_  
Intensity \_\_\_\_\_ Hours of Illumination \_\_\_\_\_

Construction and electrical specifications (for the purpose of enabling determination on that the sign meets all applicable structural and electrical requirements of the building code):

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Value of the proposed sign: \_\_\_\_\_

The number, type, location and surface area of all existing signs on the same property and/or building on which the sign is to be located: \_\_\_\_\_

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This certificate is valid for a 6 month period after date of issuance. I hereby certify that the information stated on and submitted with this application is true and correct. I also understand that the submittal of incorrect information will result in the revocation of this permit and any worked performed will be at the risk of the applicant.

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Office Use Only**

Zoning Classification: \_\_\_\_\_ Planning District: \_\_\_\_\_

(Check appropriate box)  Approved  Denied

Comments: \_\_\_\_\_

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Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Administrator (or designee) Signature: \_\_\_\_\_ Date: \_\_\_\_\_