



Sign and Flagpole Permit Application

City of Soda Springs 9 West 2nd South

Ph: 208-547-2600 Fax: 208-547-2601

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It is required you submit a sketch of property lines & placement of sign/flagpole on property, including dimensions.

Owner Name:	Address:	City, State, Zip:	Phone:
Applicant Name:	Address:	City, State, Zip:	Phone:
Installer Name:	Address:	City, State, Zip:	Phone:
Engineer:	Address:	City, State, Zip:	Phone:
Address of Proposed Sign /Flagpole:			
Sign/Flagpole Dimensions: Length: _____ Width: _____ Height: _____			
What will the sign say? _____ _____ _____			
Material (circle one): Wood Steel Plastic Other: _____			
Date for Installation:			

A freestanding sign, a sign erected on a freestanding frame, mast or pole, shall not exceed twenty-five feet in height measured from the ground. Any sign shall be proportional to the building on which it is to be mounted and the length of a sign shall not exceed the building frontage. Up to two free standing signs shall be permitted per business. Each sign shall not exceed 200 square feet of total sign area per one side which includes the border, trim, cutouts and extensions, but does not include supports and decorative bases. No sign shall project closer to a street than eighteen inches from the back of the adjacent street curb, and if there is no curb, the shall project no closer to a street than eighteen inches from the inside of the property line. No sign is permitted to project within the right-of-way of any highway. No sign shall be lower than eight feet above any pedestrian walkway or parking lot. All signs located along a state highway shall comply with all state requirements and permitting. Refer to Soda Springs Code 17.63 for all regulations regarding Signs and Flagpoles.

By signing below, you agree to adhere to the sign requirements of the City of Soda Springs and honor the easements that are in place.

Applicant(s) Signature: _____ **Date:** _____

Building Inspector Approval: _____ **Date:** _____

Zone:	Easements:		
Application Received By:		Date:	
Fee: \$25.00	Receipt #	Date Paid:	