

**City of Milton**  
**PLANNING & DEVELOPMENT DEPARTMENT**

**APPLICATION FOR MEMORIAL SIGN PERMIT**

Date of Application \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Owner of Property \_\_\_\_\_ Phone # \_\_\_\_\_

Property Identification No.# /Parcel ID# \_\_\_\_\_

Location of Sign (Street Address) \_\_\_\_\_

Installer: \_\_\_\_\_ Phone #: \_\_\_\_\_

**NOTE: PLEASE ATTACH PLACEMENT PLAN**

Property Line Setback: \_\_\_\_\_ Leading Edge from Right of Way: \_\_\_\_\_ Sight Triangle \_\_\_\_\_

**REQUIRED WITH APPLICATION:**

Provide a drawing of site with streets and building locations.

\_\_\_\_\_

I understand that the information provided is for the purpose of obtaining City approval to install/erect a memorial sign within the City of Milton. I agree to meet all city, county, state and federal requirements relating to the sign detailed in this application.

\_\_\_\_\_

Applicant Signature

\_\_\_\_\_

Date

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**DEVELOPMENT ACTION: Development Permit No.:** \_\_\_\_\_

Application reviewed by \_\_\_\_\_ Date \_\_\_\_\_

Date of Approval \_\_\_\_\_ Date of Denial \_\_\_\_\_

Reason for Denial \_\_\_\_\_

Other Comments or Remarks \_\_\_\_\_