



**City of Portales**

200 East 7<sup>th</sup> Street , Portales, NM 88130  
Phone (575) 356-8449 Fax (575) 226-0204

# Sign Permit Application

*Work begun prior to payment of permit, will result in fee being doubled.  
All information must be completed before submitting this application.  
Permit card must be visible at all times during construction.*

## **SIGN LOCATION, DESCRIPTION & TYPE**

LOCATION: \_\_\_\_\_

DESCRIPTION: \_\_\_\_\_

TYPE: \_\_\_\_\_

HEIGHT ABOVE SIDEWALK: \_\_\_\_\_ PROJECTION BEYOND PROPERTY LINE: \_\_\_\_\_

VALUATION: \$ \_\_\_\_\_ FEES: \$10.00 (MAKE CHECK PAYABLE TO THE CITY OF PORTALES)

## **APPLICANT, OWNER, CONTRACOR & ENGINEER INFORMATION**

APPLICANT: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

OWNER: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CID LICENSE #: \_\_\_\_\_

ENGINEER: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ LICENSE #: \_\_\_\_\_

## **DISCLAIMER AND SIGNATURE**

*I hereby certify that all information in this permit is correct and that any additional required permits will be obtained.  
All work will be done in strict accordance with the building and zoning codes of the City of Portales, New Mexico.*

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*Date*

Inspector Approval: \_\_\_\_\_

Date: \_\_\_\_\_ Amount Pd: \_\_\_\_\_ Cashier: \_\_\_\_\_ Receipt #: \_\_\_\_\_