

## Code / Permits

**Please Note: Dualite will manufacture product based on the information you provide on this form. Please be exact in providing information.**

Measurement Survey

Location \_\_\_\_\_ Contact \_\_\_\_\_ E-mail \_\_\_\_\_  
 Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Project Name \_\_\_\_\_

### CODE ALLOWANCES

#### FREE STANDING SIGNS

Illumination: Interior Yes  No  Other: \_\_\_\_\_  
 Disconnect Switch Required: Yes  No   
 Allowance Formula \_\_\_\_\_ Maximum Height: \_\_\_\_\_  
 Max. Number Signs \_\_\_\_\_ Setback Requirements: \_\_\_\_\_ Measured From: \_\_\_\_\_  
 Special Restrictions or Requirements (i.e. landscaping): \_\_\_\_\_

**WALL SIGNS** allowed? Yes  No  Other: \_\_\_\_\_  
 Disconnect Switch Required: Yes  No   
 Illumination: Interior Yes  No  Other: \_\_\_\_\_  
 Allowance Formula \_\_\_\_\_ Maximum Number Signs \_\_\_\_\_  
 Method of calculation (i.e. building frontage, wall area, etc.) \_\_\_\_\_  
 Special Restrictions regarding placement: \_\_\_\_\_

**DIRECTIONAL SIGNS** allowed? Yes  No  Other: \_\_\_\_\_  
 Disconnect Switch Required: Yes  No   
 Illumination: Interior Yes  No  Other: \_\_\_\_\_  
 Maximum Size Allowed: \_\_\_\_\_ Maximum Height Allowed: \_\_\_\_\_  
 Maximum Number Signs \_\_\_\_\_ Copy Allowed (other than Enter/Exit): \_\_\_\_\_

#### OTHER SIGNAGE

**L.E.D. Message Ctr:** Allowance Formula \_\_\_\_\_ Flashing Allowed Yes  No   
 Special Restrictions \_\_\_\_\_

**AWNING:** Allowance Formula \_\_\_\_\_ Illuminated: Yes  No   
 Copy/Logos Allowed: Yes  No  Special Restrictions: \_\_\_\_\_

**TEMPORARY SIGNS or BANNERS:** Allowance Formula: \_\_\_\_\_  
 Allowance Time Period \_\_\_\_\_

**OTHER:** \_\_\_\_\_

If existing signs exceed the code allowance, are they "Grandfathered" in? Yes  No

Can we change signs if square footage remains the same? Yes  No

Change Faces? Yes  No

### VARIANCE INFO

Filing Cost \_\_\_\_\_ Who is the Hearing Body? \_\_\_\_\_ How many days prior to meeting must application be filed? \_\_\_\_\_

Meeting Times / Dates \_\_\_\_\_ Total Appeal time frame? \_\_\_\_\_

Documents needed for filing:  SITE PLAN  ENGINEERING  OTHER \_\_\_\_\_  
 (Mark item with asterisk (\*) if scaled docs are required.  ELEVATIONS  ARTWORK  OTHER \_\_\_\_\_

Quantity of documents required: \_\_\_\_\_ Documents required in color (please explain) \_\_\_\_\_

Does staff file a report? \_\_\_\_\_ Who is in charge of Staff Reports? \_\_\_\_\_ Phone \_\_\_\_\_

Recommended attorney name \_\_\_\_\_ Phone \_\_\_\_\_

Chances of success in your opinion (please explain) \_\_\_\_\_

Are you required to attend meeting Yes  No  Are you willing to attend on client's behalf? Yes  No

What is your total cost (staff time, travel, etc.) to attend? \_\_\_\_\_

This form completed by \_\_\_\_\_

### PERMITS (check all that require permits)

Reface  Like for Like  New Signs  Electrical  Other \_\_\_\_\_

Elevation Drawings Required? Yes  No  Superimposed on bldg Yes  No   
 Scaled Drawing Yes  No

Site Plan Required? Yes  No  Hand Drawn Yes  No   
 Scaled Drawing Yes  No

Letter of Authorization required? Yes  No  On letterhead? Yes  No   
 Notarized? Yes  No

Artwork/Sign Drawings: Color required? Yes  No  Scale required? Yes  No

Notice of Commencement Required? Yes  No

Engineering - State Certified: Yes  No

Sign Construction Drawings Required? Yes  No

Materials List Required? Yes  No

Separate Mounting Attachment Dwg. Req'd? Yes  No

Does Shopping Center Landlord Criteria (or other) apply? Yes  No - If yes, please provide explanation on reverse side of this form and attach copy of criteria.

Property Information Req'd - Check all that apply:

Owners Name & Address  Tax ID#  Parcel#  Legal Description of Property

UL Number Required for application per sign? Yes  No

Are there stipulations for UL (i.e. per individual letter)? Yes  No  Provide explanation on reverse side

Value of sign required? Yes  No

Specify Wind Load requirement: \_\_\_\_\_

#### ELECTRICAL

Electrical load required: Amps \_\_\_\_\_ Watts \_\_\_\_\_ Other \_\_\_\_\_

Licensed Electrician required to pull electrical permits? Yes  No

#### FEES

Application Fee (if applicable) \_\_\_\_\_ Electrical Permit Fee \_\_\_\_\_

Sign Permit Fee \_\_\_\_\_ Expiration Date \_\_\_\_\_ Other Fee \_\_\_\_\_

Inspection Fee? Yes  No  Type of Inspection: \_\_\_\_\_

List other types of NO COST inspections req'd: \_\_\_\_\_

If more than one copy of each document is required, write the number required next to the item.



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