

STOKES COUNTY
APPLICATION FOR SIGN PERMIT

DATE: _____

NAME OF OWNER: _____

ADDRESS: _____

LOCATION OF PROPERTY: _____

TYPE OF SIGN:

SIZE: _____ DOUBLE SIDED _____

ELECTRICAL _____

CONTRACTOR:

NAME: _____ LICENSE# _____

ADDRESS: _____ PHONE# _____

ELECTRICAL CONTRACTOR:

NAME: _____ LICENSE# _____

ADDRESS: _____ PHONE# _____

SEND APPLICATION TO STOKES COUNTY INSPECTION DEPARTMENT, P.O.
BOX 20, DANBURY, NC 27016.

SIGNATURE OF CONTRACTOR OR
AUTHORIZED PERSON