

**SIMS, NORTH CAROLINA**  
**6501 US Hwy 264-Alt, P.O. Box 161, Sims, NC 27880**  
**SIGN PERMIT APPLICATION**

**FILING IINSTRUCTIONS:**

- Applicants are encouraged to contact the Zoning Administrator prior to applying for a permit.
- Submit a completed permit application along with the appropriate fee to the Town Clerk at Town Hall prior to construction and/or obtaining a building permit from Wilson County Inspections Office. The application must be completed in full including submittal requirements.
- All signs shall comply with Article 10 – Signs of the Sims Zoning Ordinance.
- All signs shall be kept in proper repair with all braces, bolts, clips, guys, anchors, supporting frames, and fastenings free from deterioration, insect infestation, rot, rust, or loosening. All signs shall be kept neatly finished with lettering intact, and, if of a type that requires painting, it shall be free from visible peeling or chipping. Obsolete signs and their supporting structures must be removed within ninety (90) days. If the sign is a replacement, the old sign must be removed before a new sign is installed.
- Please be advised that an approved permit shall expire and be cancelled unless the work authorized by it shall have begun within six (6) months of its issued date.
- For additional information or assistance, call the Zoning Administrator at (252) 916-7013.

**Application Date:** \_\_\_\_\_ **Case Number:** \_\_\_\_\_

**ADDRESS of SITE:** \_\_\_\_\_ **PARCEL ID or PIN#** \_\_\_\_\_

**APPLICANT NAME:** \_\_\_\_\_

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

**TELEPHONE #:** \_\_\_\_\_ **EMAIL ADDRESS:** \_\_\_\_\_

**SITE OWNER NAME:** \_\_\_\_\_ **TELEPHONE#:** \_\_\_\_\_

**OWNER ADDRESS:** \_\_\_\_\_

**CURRENT ZONING:** \_\_\_\_\_

**TYPE OF USE:** RESIDENTIAL: \_\_\_\_\_ COMMERCIAL: \_\_\_\_\_ OTHER: \_\_\_\_\_

**PROJECT INFORMATION:**

**1. Type and Number of Signs:**

|                                |                                |
|--------------------------------|--------------------------------|
| _____ Awning Sign              | _____ Canopy Sign              |
| _____ Development Sign         | _____ Incidental Sign          |
| _____ Ground/Monument Sign     | _____ Pole Sign                |
| _____ Outdoor Advertising Sign | _____ Temporary Sign or Banner |
| _____ Wall Mounted Sign        | _____ Window Sign              |

**2. Lighting:** \_\_\_\_\_ Illuminated \_\_\_\_\_ Non-Illuminated

**3. Is this an application to:**

**Erect** \_\_\_\_\_ **Repair** \_\_\_\_\_ **Alter** \_\_\_\_\_ **Other** \_\_\_\_\_

**4. Is there an existing signage:** \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, \_\_\_\_\_ Square Feet

5. If existing signage, **will it be removed?** \_\_\_\_\_ Not Applicable \_\_\_\_\_ Yes \_\_\_\_\_ No
6. Will the new sign have changeable copy? \_\_\_\_\_ Yes \_\_\_\_\_ No
7. Building and Lot Frontage: **Building Frontage** \_\_\_\_\_ Ft. **Lot Frontage** \_\_\_\_\_ Ft.
8. **Dimensions** of proposed sign(s): (*in feet and inches*)
- \_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ Total Sq. Ft.
- \_\_\_\_\_ X \_\_\_\_\_ = \_\_\_\_\_ Total Sq. Ft.
9. **Total height** of monument/ground or freestanding sign once erected (from ground to top of sign): \_\_\_\_\_ Feet \_\_\_\_\_ Not Applicable
10. **What material will sign be made of:**
- Face \_\_\_\_\_ Frame \_\_\_\_\_ Support \_\_\_\_\_
- Face \_\_\_\_\_ Frame \_\_\_\_\_ Support \_\_\_\_\_
11. Other information, which would clarify request: \_\_\_\_\_

**12. Other information to be included:**

- (Wall mounted) A drawing or image of the building façade indicating the proposed location of the sign, height, dimensions, and square footage.
- A detailed drawing or sketch showing the sign, its dimensions, and its location in relation to property lines, rights-of-way, site distance triangles (if applicable), and existing sign(s), if applicable. (Ground or free-standing signs)
- Details of how the sign will be installed in the ground.
- Illuminated signs may require a separate Electrical Permit; please contact Wilson County Inspection Office at (252) 399-2965

I HEREBY CERTIFY THE STATEMENTS MADE HEREIN ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. BY SIGNING THIS APPLICATION, THE APPLICANT AGREES THAT IF THIS APPLICATION IS APPROVED, THE SIGN WILL CONFORM WITH THE REQUIREMENTS OF THE NORTH CAROLINA STATE BUILDING CODE AND THE SIMS ZONING ORDINANCE RELATING TO SIGNS. I HEREBY GRANT PERMISSION FOR THE TOWN'S ZONING ADMINISTRATOR TO ENTER MY PROPERTY FOR INSPECTIONS.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Town of Sims:**

PERMIT FEE PAID: \_\_\_\_\_ DATE PAID: \_\_\_\_\_

SDF REQUIRED: Y      N      SDF PAID: W/S      DATE PAID:

APPLICATION:            APPROVED            DENIED            SIGN PERMIT #:           

INITIAL INSPECTION DATE: \_\_\_\_\_ FINAL INSPECTION DATE: \_\_\_\_\_