

City of Dover, DE Department of Planning and Inspections P.O. Box 475, Dover, Delaware 19903 (302) 736-7010 Fax: (302) 736-4217 www.cityofdover.com

Permit #_____

Sign	Permit	Applicatio)n
------	---------------	------------	----

Applicant's Name:					
Project Name:					
Address:					
Phone:		Dover Busine	ess License #		
Property Owner	:		E-mail:		
Contractor Name:					
Address:					
Phone:		Dover Business	License #:		
E-mail:					
Sign Information	1	2	2	4	F
Sign	1	2	3	4	5
New/Reface					
Type of Sign Ex. wall, monument, window, etc	с.				
Dimensions Length, width and depth					
Square Footage					
Setback from Right-of-Way					
Sign Material Ex., aluminum, PVC,					
Overall Height					
Clear Height Wall signs only					
Illumination Type Internal, external, LED, etc.					
For Office Use Only	Tax Parcel #				
Data Bagaiyad		Data Jaguadi			

For Office Use Or	ıly	Tax Parcel #						
Date Received:				Date Issued:				
Planner Assigned		Zoning District		Historic District	Y/N Adi, to Residential Y/N		Date Approved	
Road Classification	UPA UMA UC	Accurate Plot Plan	Y/N/NA	Wall Elevation	Y/N/NA Sign Elevation Y/N			
Unified Sign#/BOA #		Application Complete	Y/N	Total # Signs	Total SF Signs			
Fee Paid	Check #	Cash	Col	llected By	Permit Fee \$			

Applicant's Signature

I the undersigned do affirm that all the information provided in this application is accurate. I also affirm that I am authorized by the Property Owner and have the authority to make this application. Finally I will perform all work in accordance with the City of Dover Code and of this permit.

EN N M	
St Caller	
COLUMN ST	

City of Dover, Delaware SIGN TABLE

Artiments		1				-			1
Use Specific		Pood Turc	Permitted Signs	# Permitted	Max	Max	% of Total Wall Area	Setback	Exclusion Zone
		Road Type	Sign Type	# r er illitted	Size	Height		(R.O.W)	
Residential Uses and Non Residential Uses in Residential Districts	Single-Family Detached/ Semi-detached	All Streets	Signs permitted in § 4.5 only						
Residential Uses and Non sidential Uses Residential Districts	Professional Office	All Streets	Post or Monument	1/entrance	12 S.F.	7'	N/A	5'	20'
side an ntia side istri	riolessional onice	All Streets	Wall	1/frontage	16 S.F.	7'	≤ 15%	N/A	N/A
Re: Jses side Re: D	Subdivisions		Wall &	1/frontage	32 S.F.	N/A	≤ 15%	N/A	N/A
L Re:	Multi-family residential uses Manufactured home parks	All Streets	Monument or post and panel	2 /entrance	32 S.F.	7'	N/A	5'	20'
0			Wall &	2/frontage	32 S.F.	N/A	≤ 15%	N/A	N/A
nt to es		Urban Principal	Monument or post and panel OR	1/entrance	32 S.F.	7'	N/A	10'	20'
jace r us	Places of Worship Daycare	Arterial	Post ** &	1/frontage	16 S.F.	7'	N/A	5'	5'
ad ad	Centers		Pylon*	1/frontage	32 S.F.	30'	N/A	30'	50'
uses stric	Approved Conditional Uses	Urban Minor	Wall &	2/frontage	32 S.F.	N/A	≤15%	N/A	N/A
tial Di	Educational/Institutional All other approved		Monument or post and OR	1/entrance	32 S.F.	7'	N/A	5'	20'
Bitte Non-residential Uses	Arterial	Post**	1/frontage	16 S.F.	7'	N/A	5'	10'	
Non-Residential uses adjacent to Residential Districts or uses		Urban	Wall &	2/frontage	32 S.F.	N/A	≤ 15%	N/A	N/A
Jon- Re		Local/	Monument or post and panel OR	1/entrance	32 S.F.	7'	N/A	5'	20'
2	Collector	Post**	1/frontage	16 S.F.	7'	N/A	5'	10'	
			Wall &	2/frontage	No max	N/A	≤15%	N/A	N/A
S		Urban Principal	Monument or post and panel OR	1/entrance	100 S.F.	10'	N/A	10'	20'
l trrict		Arterial	Pylon OR*	1/frontage	100 S.F.	30'	N/A	15'	50'
ntia Dis			Pylon*	1/frontage	150 S.F.	30'	N/A	31'	50'
Non-Residential Uses in Non-Residential Districts	Non-Residential Uses	Urban	Wall &	2/frontage	64 S.F.	N/A	≤ 15%	N/A	N/A
	Minor	Monument or post and panel OR	1/entrance	64 S.F.	7'	N/A	5'	20'	
Non -Res		Arterial	Post**	1/frontage	16 S.F.	7'	N/A	5'	20'
Von		Urban	Wall &	2/frontage	32 S.F.	N/A	≤ 15%	N/A	N/A
-		Local/	Monument or post and panel OR	1/entrance	32 S.F.	7'	N/A	5'	20'
		Collector	Post	1/frontage	16 S.F.	7"	N/A	5'	10'

* Denotes that an additional wall sign may be permitted/added in lieu of a freestanding pylon sign. ** Post sign would be lieu of a monument sign or post and panel sign.



CITY OF DOVER DEPARTMENT OF PUBLIC WORKS

PO Box 475 Phone: 302-736-7025 Dover, DE 19903 Fax: 302-736-4217

PUBLIC WORKS RENOVATION CHECKLIST FOR PLUMBING AND BUILDING PERMIT APPLICATION

The City of Dover's Water / Wastewater Handbook defines a renovation project as any project which proposes to change the character of the water and/or wastewater service at a subject location. Examples of such changes include, but are not limited to, changes in plumbing fixture quantity, changes to the size of the water line serving the location, changes to the size of the sanitary sewer line serving the location, and/or relocation of the water meter, water line and/or sewer line serving the location. <u>All renovation projects are required to bring the component of the water and/or wastewater service to be changed up to current standards and specifications as part of the proposed project.</u>

In order to determine if your project requiring a Plumbing or Building Permit is applicable please complete the following checklist. If you answer "Yes" to any of the questions below your project may be subject to the renovation project requirements of the Department of Public Works.

In addition to the water / wastewater concerns, the Department of Public Works is requiring further questions related to the multiple divisions within this Department. These divisions include sanitation, grounds, streets and storm sewer. Each division could be impacted by a plumbing or building permit application. The purpose for the questions related to the aforementioned divisions is to assure the City of Dover as well as the property owner, that all services to the property can be maintained according to the current code.

If there is a recorded easement on your property, such as, but not limited to, utility, cross access, drainage, then building a structure within the easement is prohibited. The purpose of an easement is to allow the proper authorities access to their infrastructure. This cannot be accomplished with a structure built above a piece of infrastructure.

This form will be forwarded to the Department of Public Works and you will be contacted directly by a representative of the Department, within five (5) business days, regarding specific requirements and additional information that may be required. All requirements will be provided under separate cover to the applicant from the Department of Public Works and copied to the Planning and Inspections Department in order to confirm completion with the Department of Public Works prior to final inspection. As such, no delay in the receipt of your Plumbing or Building Permit will occur.

Brief Description of Work (To Be Completed by Applicant):

WORK SITE LOCATION	Address:
	Parcel ID:

Applicant (Owner or Contractor)	
Contact Person	
Mailing Address	
City, State, Zip	
Telephone	
Fax	
E-mail Address	

Does Your Project Propose	Yes	No	If Yes, Describe
an increase or decrease to the quantity of plumbing fixtures at the location?			
a change in size of the water line serving the location?			
a new water irrigation system?			
a change in size of the sanitary sewer line serving the location?			
relocation of the water meter?			
relocation of the water line serving the location or any associated appurtenances?			
relocation of the sanitary sewer line serving the location or any associated appurtenances?			
any work within the right-of-way?			
any proposed sidewalk work?			
any proposed concrete work?			
any alteration to any storm drain infrastructure?			
any proposed curb alteration, i.e., new driveway to property?			
any proposed scaffolding to renovate building exterior?			
any proposed tree or shrub plantings within the right-of-way?			
an upgrade in sanitation service?			
a relocation of the existing trash pick-up location?			

EASEMENT*	Yes	No
Is there any existing easement on this property? (utility, drainage, cross access, etc.)		

*-It is prohibited to build any structure within an existing easement.

I hereby certify that the information provided above is correct and acknowledge that should any differences be identified throughout the course of the project that all renovation project requirements still apply.

Printed Name of Applicant

Signature of Applicant

Date

THIS FORM MUST BE COMPLETED AND TURNED IN WITH PLUMBING PERMIT APPLICATION OR BUILDING PERMIT APPLICATION.