

P.O. Box 106
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The Town Of Selbyville



Mayor
Clifton C. Murray
Councilmen
Jay C. Murray
G. Frank Smith, 111
Clarence M. Tingle, Jr.
Richard A. Duncan, Sr.

TEMPORARY SIGN PERMIT APPLICATION

1. DATE _____ APPLICATION NUMBER _____
2. NAME/ADDRESS OF APPLICANT(S) _____
_____ PHONE NUMBER _____
3. LOCATION OF PROPERTY: (A) LOT NO. _____ (B) BLOCK NO. _____
(C) STREET _____, (D) SUBDIVISION _____
(E) STREET SIDE _____ N, _____ E, _____ W, _____ S.
4. PRESENTLY ZONED AS: _____ R1 _____ R2 _____ R3 _____ MR _____ DR _____ MH
_____ HR _____ HB _____ GC _____ IP
5. TYPE OF SIGN REQUESTED _____
(DRAWING MUST BE ATTACHED)
6. SIZE OF SIGN REQUESTED _____
7. HEIGHT OF SIGN _____
8. LOCATION OF SIGN _____
(BUILDING, NEXT TO ROAD, ETC.)
9. BUILDER'S NAME/ADDRESS _____
10. COST OF CONSTRUCTION/RENOVATION _____
(ATTACH COPY OF CONTRACT, PROPOSAL, BID, ETC.)
11. STARTING DATE _____ COMPLETION DATE _____
12. PERMIT COST
INSPECTION FEE - \$25.00
APPLICATION FEE - \$25.00
FINAL INSP. FEE - \$25.00
\$75.00