



## Corporation of Harpers Ferry

Listed on the National Registry of Historic Places

1000 Washington Street • PO Box 217 • Harpers Ferry, WV 25425

304-535-2206

### SIGN PERMIT APPLICATION

#### 1. **Property Owner(s) Information:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company Name (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Apt/Ste #: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Other Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

#### 2. **Applicant Information:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company Name (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Apt/Ste #: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Other Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

#### 3. **Business or Organization:**

Business Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Apt/Ste #: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Other Phone #: \_\_\_\_\_

#### 4. **Permit Type Requested:** Permanent Temporary

#### 5. **Sign Type Requested:**

**Identification Sign** – *pertains to name, purpose and conduct of business*

**Information Sign** – *pertains to operations or access information*

**Merchandise Sign** – *describes the articles for sale or type of service*

#### 6. **The number of existing permanent signs for this establishment include:**

\_\_\_\_\_ **Identification Signs** (*maximum one per frontage with customer entrance*)

\_\_\_\_\_ **Information Signs** (*maximum 3 total*)

\_\_\_\_\_ **Merchandise Signs** (*maximum 2 total*)

Application Number: \_\_\_\_\_

Rev. 1-2026

I hereby certify that (1) I am the owner or that I have the authority of the owner to make application, (2) I have read and understand the accompanying instructions, (3) the information given is correct and (4) all provisions of state and municipal laws and ordinances governing this application will be complied with, whether specified herein or not. I understand that (1) town staff may visit and photograph the subject property, (2) perform reasonable site inspections as required to determine compliance, and (3) that this application, including all submitted documents and staff photos relating to this application, is public information and can be made available upon request. Further, I understand that any deviation from the application as requested shall require the express written approval of the Code Enforcement Officer or the Mayor's designee.

\_\_\_\_\_ Date  
Signature of Applicant

\_\_\_\_\_ Date  
Signature of Applicant

\*\*\*\*\*

**For Official Use Only**

Date Received \_\_\_\_\_ Received By: \_\_\_\_\_

Fees Paid \_\_\_\_\_ Receipt Number \_\_\_\_\_

Deposits Paid \_\_\_\_\_ Receipt Number \_\_\_\_\_

Conditions of Approval: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Rational for Denial \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Application Number: \_\_\_\_\_

Rev. 1-2026

## FEE SCHEDULE

Application Fee..... \$ 25.00

**Payable to the Corporation of Harpers Ferry**

### SUPPORTING DOCUMENTATION

The following are required for all Sign Permit Applications unless waived by the Code Enforcement Officer:	Provided
<b>Plans</b> showing all dimensions (maximum 6 square feet for Identification or Merchandise signs, 3 square feet for Information signs), the shape, material, character, lettering style, colors, design, full text and exact location proposed.	<input type="checkbox"/>
<b>Elevation Drawing</b> is required if sign is not located flat against an exterior building wall. Must include details as to material, height, shape and location of the standard, pole, bracket or other support to which the sign will be attached. No sign shall be hung so that its bottom is less than 7 feet above a pedestrian thoroughway.	<input type="checkbox"/>
<b>Lighting Plan</b> showing number (maximum 2), lumens (maximum 820) and placement of lights used to illuminate the sign.	<input type="checkbox"/>

**For Official Use Only**

Authorized Town Official (person granting the waivers shown above)

**Name** \_\_\_\_\_

**Title** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

Application Number \_\_\_\_\_

Rev 1-2026