



Office Use Only

Application No. _____

APPLICATION – SIGN PLACEMENT

Town of Cheswold Planning and Zoning P.O. Box 220; 691 Main Street, Cheswold, DE 19936
 Phone: 302-734-6991 Fax: 302-734-1355 Email: cheswoldoffice@comcast.net
 Website: <http://cheswold.delaware.gov>

APPLICANT INFORMATION

 (LAST NAME) (FIRST NAME) (HOME PHONE) (CELL PHONE)

 (MAILING ADDRESS) (CITY) (STATE) (ZIP)

 (EMAIL ADDRESS) (WORK PHONE)

PROJECT SITE/PROPERTY & OWNER INFORMATION

 (LAST NAME) (FIRST NAME) (HOME PHONE) (CELL PHONE)

 (MAILING ADDRESS) (CITY) (STATE) (ZIP)

 (EMAIL ADDRESS) (WORK PHONE)

 (E911 or AVENUE/STREET ADDRESS) (MAP ID) R1 R2 R3 R4 C1 C2 I1 I2
 (ZONING DISTRICT/CODE – Check One)

OLD TOWN FOX POINTE MAIN ST. LEYLAND PK. STRIMMEL'S PARKERS RUN STONINGTON BUSINESS PARK
 (SECTION of TOWN – Check One) IDN

 (PIDN) (LOT #) (ACRES)

SIGN MEASUREMENT and PLACEMENT GUIDE

Location/Subject of Sign	Sign Types Allowed	Maximum Area (SF)	Permit Required?
Home-based Business	Free-standing	16	YES
Home-based Business	Wall	16	YES
Business/Commercial Use in Non-Residential Zone	Free-standing	32	YES
Business/Commercial Use in Non-Residential Zone	Wall	32	YES
Sub-division Entrance	Free-standing	32	YES
Real Estate - Temporary	Free-standing	16	NO
Conditional Use in a Residential Zone	Free-standing	16	YES
Conditional Use in a Residential Zone	Wall	16	YES

APPLICANT QUESTIONS

- | | YES | NO |
|--|--------------------------|--------------------------|
| 1. Are there multiple property owners? <i>(If yes, please attach names and addresses)</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are all application documents attached?
<i>(Permit application; plot plan; materials list; sign price; homeowners approvals; contractor's name; address; contact# and if required; any drawings or sketches)</i> | <input type="checkbox"/> | <input type="checkbox"/> |



Office Use Only

Application No. _____

APPLICATION – SIGN PLACEMENT

Town of Cheswold Planning and Zoning P.O. Box 220; 691 Main Street, Cheswold, DE 19936
Phone: 302-734-6991 Fax: 302-734-1355 Email: cheswoldoffice@comcast.net
Website: <http://chewold.delaware.gov>

SITE PLAN

Scale: _____" = _____ft.





Office Use Only
Application No. _____

APPLICATION – SIGN PLACEMENT

Town of Cheswold Planning and Zoning P.O. Box 220; 691 Main Street, Cheswold, DE 19936
Phone: 302-734-6991 Fax: 302-734-1355 Email: cheswoldoffice@comcast.net
Website: <http://chewold.delaware.gov>

APPLICANT/OWNER CERTIFICATION

I certify that the information and exhibits submitted are true and correct to the best of my knowledge. Pursuant to said authority, I hereby permit Town of Cheswold Officials to enter upon my property for the purpose of inspection, and, if necessary, for posting a public notice on the property.

(APPLICANT SIGNATURE) (DATE)

(OWNER SIGNATURE – *REQUIRED if not the Applicant*) (DATE)

For Office Use Only

Application No. _____ Certificate No. _____ Date Issued: _____
Check Received: _____ Check No. _____ Check/Cash Amount: _____
Amount Reimbursed: _____ Check No. _____ Date Issued: _____
Approved by: _____ Land Use Administrator Date Approved: _____

FOR TOWN USE ONLY

1. What are proposed sign **SETBACKS***? Front: _____ Left Side: _____ Right Side: _____ Back: _____
*** NO SIGN SHALL BE PLACED WITHIN THE SIGHT TRIANGLE** (See Article 13– Table 13.2) (See Article 8 – Section C)

	YES	NO
A. Is sign Free-standing ? If Yes: Front setback = 10' from right of way If Yes: Side setback = Same as principal use of property	<input type="checkbox"/>	<input type="checkbox"/>
B. Is sign Wall mounted ? If Yes: Sign shall be placed on a wall facing a public street or right-of-way, having the same setbacks s principal use of property	<input type="checkbox"/>	<input type="checkbox"/>

2. What is proposed sign **SIZE**? Height: _____ Width: _____

3. Is sign **Free-standing**? If Yes, then height maximum = 5'

4. Is sign **Wall mounted**? If Yes, then sign must be placed below the eave.
On flat roofed structures, no sign shall be placed higher than the roof of the structure, or the maximum permitted building height in the zone, whichever is more restrictive.

5. **COLOR** – can the color combinations be confused with a traffic sign or signal?
Date: _____ Initials of Police Chief: _____

6. **GLARE**:
Will sign be illuminated by an enclosed lamp design?



Office Use Only
Application No. _____

APPLICATION – SIGN PLACEMENT

Town of Cheswold Planning and Zoning P.O. Box 220; 691 Main Street, Cheswold, DE 19936
Phone: 302-734-6991 Fax: 302-734-1355 Email: cheswoldoffice@comcast.net
Website: <http://chewold.delaware.gov>

FOR TOWN USE ONLY

- | | YES | NO | |
|--|--------------------------|--------------------------|------------------------------|
| 7. Will sign be illuminated by indirect lighting from a shield source that prevents glare from beyond the property line? <i>Note: Signs must be illuminated using an enclosed lamp design or indirect lighting from a shielded source in a manner that prevents glare from beyond the property line.</i> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 8. TRAFFIC SAFETY - will sign be illuminated with a pattern or lightning combination that resembles a traffic signal?

Date: _____ Initials of Police Chief: _____ | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. FLASHING – will sign contain or be illuminated by flashing revolving, or intermittent lights, or Lights that change intensity. | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. RESIDENTIAL LOCATION – will lighted sign only be illuminated during business hours?
<i>Note: Any sign on a lot or parcel within 150' of residentially used properties must be illuminated only during the hours the entity is open for public business.</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> N/A |
| 11. STRUCTURAL LIMITATIONS - will sign be shaped like a traffic sign or signal, or use wording similar to traffic sign or interfere with traffic safety?

Date: _____ Initials of Highest Ranking Town Police Official _____ | <input type="checkbox"/> | <input type="checkbox"/> | |
| 12. Will sign be shaped to resemble any human or animal form? | <input type="checkbox"/> | <input type="checkbox"/> | |
| 13. Will sign be set in motion or powered by the wind? | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14. Will sign have any moving parts? | <input type="checkbox"/> | <input type="checkbox"/> | |

BUILDING INSPECTOR/CODE ENFORCEMENT OFFICER CERTIFICATION

- INSPECTION APPROVED AS SUBMITTED INSPECTION APPROVED PENDING CORRECTIONS – See Below
- INSPECTION DENIED** – See Below for Reasons

(BUILDING INSPECTOR/CODE ENFORCEMENT OFFICER SIGNATURE)

(DATE)

(DATE RE-INSPECTED)

(DATE APPROVED)

(BUILDING INSPECTOR/CODE ENFORCEMENT OFFICER SIGNATURE)



Office Use Only
Application No. _____

APPLICATION – SIGN PLACEMENT

Town of Cheswold Planning and Zoning P.O. Box 220; 691 Main Street, Cheswold, DE 19936
Phone: 302-734-6991 Fax: 302-734-1355 Email: cheswoldoffice@comcast.net
Website: <http://chewold.delaware.gov>

LAND USE ADMINISTRATOR DECISION

Does applicant meet the requirements for the installation of a sign? YES NO

If NO: why has the applicant failed?

Cite Land Use Ordinance requirements: Article # ____ Section # ____ Paragraph # ____ Various-See Below:

SIGNED: _____ DATE: _____

DATE APPLICANT NOTIFIED: _____ NOTIFIED BY: REGISTERED/CERTIFIED MAIL IN-PERSON

Note: Land Use Administrator or designee should document a written response to the applicant containing the decision and deliver it to the applicant. If delivered in-person, the applicant must sign for receipt of document.