



**CITY OF BARSTOW
COMMUNITY DEVELOPMENT**

City of Barstow
Planning Division

**APPLICATION FOR:
SIGN REFACE**

Eligibility:

Work completed on the sign does not include the following:

1. Change in panel layouts (i.e., requiring new attachment details)
2. Electrical upgrades or modifications.

Application No: _____

BSIG# _____

Sign User (DBA): _____
Mailing Address: _____

Property Owner: _____
Mailing Address: _____

Phone Number: _____
E-Mail: _____

Phone Number: _____
E-Mail: _____

Contractor: _____
 Mailing Address: _____
 Phone Number: _____
 E-Mail: _____ City of Barstow Business License #: _____
 State License #: _____ Classification: _____ Expiration: _____
 Worker's Compensation Carrier (Include Copy of Cert.): _____
 Policy #: _____ Expiration: _____

Property Address/Location: _____
 Assessor's Parcel Number(s): _____
 Existing Zoning: _____
 Present Use of Property: _____
 Construction Valuation: _____

Submittal Packet:

- Completed Sign Reface Application
- Attached images of the current sign and the proposed sign reface image.
- Application fee

REFACE SIGNATURE BLOCK: The undersigned applicant certifies that the permanent sign permit #_____ (original permit number) has not changed in size, location, and method of attachment and requests that the permit be renewed for _____ (new business name). I understand that if the dimensions, size, or framing change, a new sign permit must be applied for by my business. Furthermore, I am aware that if the sign location changes, I may need to obtain a new permit.

Date: _____ **Signature:** _____
(Sign Use / Contractor)

Date: _____ **Signature:** _____
(Property Owner)

INCOMPLETE APPLICATIONS OR POOR QUALITY GRAPHICS WILL NOT BE ACCEPTED.

LOCATION: Barstow City Hall, 220 E Mountain View St, Suite A, Barstow, CA 92311

PHONE: 760-255-5161

OFFICE USE ONLY

Date Received: _____
 Filing Fee: _____
 Attachments: _____
 City Approval By: _____

Received By: _____
 Payment Date: _____
 Receipt No: _____
 Approval Date: _____