



101 S. MAIN ST, GALENA, MARYLAND 21635  
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# SIGN PERMIT APPLICATION

REVISED 1/29/2026

<b>PERMIT NUMBER:</b>		<b>DATE/TIME RECEIVED:</b>		<b>RECEIVED BY:</b>	
SITE ADDRESS:			PARCEL NUMBER:		
SUBDIVISION:			LOT/UNIT:		
<b>APPLICANT INFORMATION</b>					
APPLICANT/BUSINESS NAME:			TELEPHONE: <input type="radio"/> HOME <input type="radio"/> BUSINESS		
ADDRESS:			E-MAIL: <input type="radio"/> HOME <input type="radio"/> BUSINESS		
CITY, STATE, ZIP:					
<b>OWNER INFORMATION</b>					
<input type="radio"/> CHECK IF INFORMATION PROVIDED ABOVE IS THE SAME					
NAME:			TELEPHONE: <input type="radio"/> HOME <input type="radio"/> BUSINESS		
ADDRESS:			E-MAIL: <input type="radio"/> HOME <input type="radio"/> BUSINESS		
CITY, STATE, ZIP:			FAX:		
<b>SIGN INFORMATION</b>					
TYPE OF SIGN: <input type="radio"/> PERMANENT <input type="radio"/> TEMPORARY			PROJECT CONSTRUCTION VALUE:		
<b>PERMANENT SIGNS</b>			<b>TEMPORARY SIGNS</b>		
<input type="radio"/> <b>A FRAME (PORTABLE - SIDEWALK)</b> PERMITTED IN ALL ZONING DISTRICTS BUT MUST BE REMOVED CLOSE OF BUSINESS/NO BLOCKING SIDEWALK, NOT TO EXCEED 48" H X 30" W			<input type="radio"/> <b>BANNER:</b> NOT TO EXCEED 20 SQFT/ MAX. 21 DAYS		
<input type="radio"/> <b>DOOR MOUNTED/SKINNED OR WALL MOUNTED (SEE ZONING FOR DETAILS)</b>			<input type="radio"/> <b>YARD</b>		
<input type="radio"/> <b>OTHER</b> _____			<input type="radio"/> <b>OTHER</b> _____		
DIMENSION OF SIGN (AREA): _____			DIMENSION OF SIGN (AREA): _____		
FOR BUILDING MOUNTED SIGN ONLY; LINEAL FOOTAGE OF FACADE: _____			SIGN DURATION: _____		
<b>ATTACHMENTS NEEDED FOR A SIGN PERMIT APPLICATION INCLUDE A PLAT OF SURVEY FOR ALL FREE STANDING SIGNS SHOWING THE LOCATION OF THE SIGN, RENDERING OF SIGN WITH DIMENSION, AND ELECTRICAL DETAILS FOR ILLUMINATED SIGNS.</b>					
<p><b>TERMS:</b> In consideration of this application and attached forms being made a part hereof, and the issuance of this permit, I/we agree to the following terms: All work performed under said permit shall be in accordance with the plans which accompany this permit application, except for such changes as may be authorized or required by the Building Official; the proposed work is authorized by the owner of record, and that I/we have been authorized by the owner to make the application and/or schedule all necessary inspections as an agent; all work will conform to all applicable codes, laws and ordinances of the Town of Galena, Maryland. I/we as owner of record or authorized agent are responsible to abide by all covenants and association restrictions as may apply to the proposed work associated with this permit. I/WE AGREE TO NOT OCCUPY THE BUILDING UNTIL ALL INSPECTIONS HAVE BEEN PERFORMED AND A CERTIFICATE OF OCCUPANCY HAS BEEN ISSUED. <b>This Permit is a public document and all information on it is subject to public review pursuant to the Maryland Freedom of Information Act.</b></p>					
SIGNATURE _____			DATE: _____		
<b>REVIEW CONCLUSIONS (all staff comments on back of application):</b>					
BUILDING CODE COMPLIANCE: _____			DATE: _____		
<input type="radio"/> APPROVED <input type="radio"/> NOT APPROVED					
ZONING CODE COMPLIANCE: _____			DATE: _____		
<input type="radio"/> APPROVED <input type="radio"/> NOT APPROVED					
RE-SUBMITTAL: _____			DATE: _____ <input type="radio"/> APPROVED <input type="radio"/> NOT APPROVED		
			<b>DATE/TIME ISSUED:</b>		