



COMMUNITY DEVELOPMENT DEPARTMENT PLANNING DIVISION

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SIGN/AWNING APPLICATION

Please type or clearly print information in ink. Failure to provide complete and accurate information may result in delays in the processing of this application.

TYPE OF APPLICATION		FEE	APPLICATION CHECKLIST	
<input type="checkbox"/> Sign/Awning			<input type="checkbox"/> 11" X 17" Plan sheets	<input type="checkbox"/> Materials/Color Samples
<input type="checkbox"/> Sign review by Planning Commission			<input type="checkbox"/> Area Plan	<input type="checkbox"/> Sign Sharing Calculations
TOTAL FEES			<input type="checkbox"/> Elevations	(multi-tenant parcels only)
PROJECT ADDRESS/LOCATION			APN (ASSESSOR'S PARCEL NUMBER)	
APPLICANT LEGAL NAME		MAILING ADDRESS		
EMAIL	PHONE	FAX		
SIGNATURE			DATE	
PROPERTY OWNER LEGAL NAME		MAILING ADDRESS		
EMAIL	PHONE	FAX		
SIGNATURE			DATE	
PARCEL AND SIGN/AWNING DATA TO BE FILLED OUT BY APPLICANT				
PRIMARY FRONTAGE/STREET NAME				
ALLOWED SIGN AREA (# SQ. FT.)				
SECONDARY FRONTAGE/STREET NAME				
ALLOWED SIGN AREA (# SQ. FT.)				
OTHER FRONTAGE/STREET NAME				
ALLOWED SIGN AREA (# SQ. FT.)				
OTHER FRONTAGE/STREET NAME				
ALLOWED SIGN AREA (# SQ. FT.)				
PROPOSED SIGNS (USE ADDITIONAL SHEETS IF NECESSARY)				
	SIGN 1	SIGN 2	SIGN 3	
SIGN TYPE				
SQUARE FOOTAGE				
LETTER SIZE				
LETTER COLOR				
BACKGROUND COLOR				
MATERIALS				
METHOD OF ILLUMINATION				
DATA ON SIGN AREA ACCORDING TO BUILDING FRONTAGE				
	PRIMARY FRONTAGE	SECONDARY FRONTAGE	OTHER FRONTAGE(S)	
EXISTING SIGN AREA				
NEW SIGN AREA				
TOTAL SIGN AREA				
FOR STAFF USE			City Date Stamp	
Accepted By		Tidemark No.		
Staff Comments				