



# CITY OF PRESCOTT

## COMPREHENSIVE SIGN PLAN

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CITY OF PRESCOTT  
COMMUNITY DEVELOPMENT DEPARTMENT  
PLANNING DIVISION  
201 S. Cortez, Prescott, AZ 86301 Ph: (928) 777-1207

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

**Assessor's Parcel Number(s):** \_\_\_\_\_

**Zoning:** \_\_\_\_\_

**\*\*No application will be accepted unless it is complete including, but not limited to, the following:**

- A meeting with a Community Development Department Planner. Date: \_\_\_\_\_
- One (1) copy of the amended comprehensive sign plan.
- One (1) 8 ½" X 11" xerographic reduction or photo reduction of the plat, if the property in question is a subdivision.
- One (1) copy of the original Comprehensive Sign Plan if this is an amendment.
- Narrative describing the request and reasons for the change.
- A filing fee in the amount of:

**NOTE: SUBMITTAL OF AN APPLICATION DOES NOT GUARANTEE THE ITEM WILL BE SCHEDULED FOR THE NEXT AVAILABLE PUBLIC MEETING. A DETERMINATION OF "APPLICATION COMPLETENESS" BY THE STAFF PLANNER IS REQUIRED BEFORE ANY ITEM WILL BE SCHEDULED FOR PUBLIC HEARING.**



# CITY OF PRESCOTT

## COMPREHENSIVE SIGN PLAN

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

<p><b>Owner Name &amp; Address (Including Zip Code):</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p><b>Phone:</b> _____</p> <p><b>Fax:</b> _____</p> <p><b>Email:</b> _____</p> <p><u>Note: If the owner is a corporation, include documents showing the signer is an authorized agent of the corporation.</u></p> <p><b>Applicant / Agent Name &amp; Address (Including Zip Code):</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p><b>Phone:</b> _____</p> <p><b>Fax:</b> _____</p> <p><b>Email:</b> _____</p> <p><b>Designer Name &amp; Address (Including Zip Code):</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p><b>Phone:</b> _____</p> <p><b>Fax:</b> _____</p> <p><b>Email:</b> _____</p>	<p style="text-align: center;"><i>For Staff Use Only</i></p> <hr/> <p>Date Received: _____</p> <p>Taken In By: _____</p> <p>Assigned To: _____</p> <p>Date Application Complete: _____</p> <p>Fees &amp; Charges: _____</p> <p>Receipt #/Date: _____</p> <p>P&amp;Z WS Date: _____</p> <p>P&amp;Z Vote Date: _____</p> <p>Council Study: _____</p> <p>Council Vote: _____</p>
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**NOTE\*\*Application must include information stating the request and the type of proposed signage, the Assessor's Parcel #, application signed and dated, indicating whether the owner or the agent. If agent, include the name and address of the property owner, phone number, and a letter of authorization.**