



City of Flagstaff

Community Development Division

211 W. Aspen Ave P: (928) 213-2601
 Flagstaff, AZ 86001 F: (928) 213-2609
www.flagstaffaz.gov

PSIGN

Date Received		Application for Permanent Sign Permit		Permit Number NA
Site Address (including suite #) 22 E Birch Ave		City, State, Zip Flagstaff, AZ 86001		Parcel # NA
Business Name Juice Pub & Eatery	Business Owner Name Vanessa Northway	City License # NA		
Local Contact or Manager Name Vanessa Northway	Phone 218-251-0909	Shopping Center/Building Name NA		
Business Mailing Address 22 E Birch Ave		City, State, Zip Flagstaff, AZ 86001	E-mail nestacular006@gmail.com	
Total Value of Sign(s)\$ \$915.93	Zoning District CB (Central Business)	Multi-Tenant (3 or more) Development or Shopping Center <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

Contact the local Registrar of Contractors Office (928) 526-2325 regarding licensed contractor requirements. If you are using a licensed General Contractor and/or subcontractors, you must provide that information prior to the permit being issued.

Sign Contractor/Vendor Name Signarama	Address 2333 E Spruce Ave	City, State, Zip Flagstaff, AZ 86004
Contact Name Jeff Wells	Phone (928) 607-9411	Email jeff@sarflagstaff.com
Contractor's License # 327075	City of Flagstaff Business License # 20369	

Description of Proposed Work:
 Providing and installing sandblasted HDU sign

Special Districts:

- Yes No This property is in a local or national Historic District. If yes, specify: _____
- Yes No This property is in the Central Sign District Downtown Historic District Flagstaff Auto Park District
- Yes No This property has a Comprehensive Sign Plan. If yes, specify: _____

Important Information about this Application:

- See the Planning Map on the **City of Flagstaff Public Mapping Portal** for information on **Zoning, Lighting Zones, and Historic Districts**: <https://gis.flagstaffaz.gov/portal/apps/sites/#/opendata/app/e875b6af210e466095227070ee2ccc94>.
- See **page 3** of this application for a complete list of submittal requirements. See **page 4** of this application and **Section 10-50.100 Sign Standards of the Zoning Code** for City of Flagstaff Sign Standards.
- Contact the **Planner of the Day** (<https://www.flagstaff.az.gov/150/Current-Planning>) with questions. A Permanent Sign Permit applicant may receive clarification from the City Zoning Code Manager on how the City is interpreting this Section.
- A **Permanent Sign Permit is required for sign face changes for existing internally illuminated signs**. A Permanent Sign Permit is not required for sign face changes within the existing frame for non-illuminated and externally-illuminated signs.
- An **Outdoor Lighting Permit** is required for changes to the lighting of externally-illuminated signs.
- An **Over-The-Counter Electrical Permit** is required for signs that include electrical work as part of installation.
- A **separate Building Permit is required for freestanding signs that meet at least one the following**: 1) The sign is more than 6 ft. tall from grade to the top of the sign, 2) The aggregate area of all signs on the structure is more than 35 square feet, and/ or 3) There is electrical work associated with the sign. An Over-The-Counter permit is not required for these signs.
- Signs in a **Historic District or in the Central Sign District also require a Heritage Preservation Commission (HPC) application**. (<https://www.flagstaff.az.gov/901/Heritage-Preservation>). Complete and submit page 1 with the application fee.
- An **application shall be considered withdrawn for failure to respond within 30 days** to corrections provided by the City.

JW (Initials) I hereby certify that the information set forth on this form is complete and accurate and do hereby agree to comply with all applicable codes of the City of Flagstaff and the State of Arizona and with any conditions attached hereto, and request that all pertinent City personnel access my property at any time deemed necessary to inspect work being done relating to this permit.

Applicant Signature: *[Signature]* Contractor Agent **Date:** 3-1-2021

For City Use		
Received By:	Fee Receipt #:	
Approval: <input type="checkbox"/> Yes <input type="checkbox"/> No	Staff Initial:	Date Approved:

Required Information for Each New Sign or Sign Face Change

Please fill out the table with the required information for each sign (provide all dimensions in feet; e.g 5.5 feet).
If there are more than three signs proposed, copy this page and fill out the table for each additional sign (label the additional signs Sign 4, Sign 5, Sign 6, etc.).

Sign 1

<input type="checkbox"/> Sign Face Change Only	<input type="checkbox"/> Building Mounted	<input type="checkbox"/> Driveway	<input type="checkbox"/> Landscape Wall	<input type="checkbox"/> Service Island
<input type="checkbox"/> Comprehensive Sign Plan	<input type="checkbox"/> Changeable Copy	<input type="checkbox"/> Freestanding	<input type="checkbox"/> Projecting	<input checked="" type="checkbox"/> Suspended
<input type="checkbox"/> Awning/Canopy	<input type="checkbox"/> Directory	<input type="checkbox"/> Interpretive	<input type="checkbox"/> Roof Mounted	<input type="checkbox"/> Window

Sign Face Dimensions: Height 25.2" Width 63.65" Depth 1.5" Sign Material(s): Sandblasted HDU

Height from grade to top of sign: 175.2" Height from grade to bottom of sign: 150"

Type of Illumination: None LED Incandescent Florescent Neon Other (specify) _____

Lighting Zone and Time Limitation: Zone 1 (9:00 PM) Zone 2 (11: 00 PM) Zone 3 (11:00 PM)

Building Mounted Signs Only:
Wall length of business on primary building frontage 16.2' Wall length of business on secondary frontage (if applicable): NA

Freestanding Signs Only:
Total length of primary street frontage 50' Total length of secondary street frontage (if applicable) NA
Total landscaping required (sq. ft.) NA Total landscaping provided (sq. ft.) NA

Sign 2

<input type="checkbox"/> Sign Face Change Only	<input type="checkbox"/> Building Mounted	<input type="checkbox"/> Driveway	<input type="checkbox"/> Landscape Wall	<input type="checkbox"/> Service Island
<input type="checkbox"/> Comprehensive Sign Plan	<input type="checkbox"/> Changeable Copy	<input type="checkbox"/> Freestanding	<input type="checkbox"/> Projecting	<input type="checkbox"/> Suspended
<input type="checkbox"/> Awning/Canopy	<input type="checkbox"/> Directory	<input type="checkbox"/> Interpretive	<input type="checkbox"/> Roof Mounted	<input type="checkbox"/> Window

Sign Face Dimensions: Height _____ Width _____ Depth _____ Sign Material(s): _____

Height from grade to top of sign: _____ Height from grade to bottom of sign: _____

Type of Illumination: None LED Incandescent Florescent Neon Other (specify) _____

Lighting Zone and Time Limitation: Zone 1 (9:00 PM) Zone 2 (11: 00 PM) Zone 3 (11:00 PM)

Building Mounted Signs Only:
Wall length of business on primary building frontage _____ Wall length of business on secondary frontage (if applicable): _____

Freestanding Signs Only:
Total length of primary street frontage _____ Total length of secondary street frontage (if applicable) _____
Total landscaping required (sq. ft.) _____ Total landscaping provided (sq. ft.) _____

Sign 3

<input type="checkbox"/> Sign Face Change Only	<input type="checkbox"/> Building Mounted	<input type="checkbox"/> Driveway	<input type="checkbox"/> Landscape Wall	<input type="checkbox"/> Service Island
<input type="checkbox"/> Comprehensive Sign Plan	<input type="checkbox"/> Changeable Copy	<input type="checkbox"/> Freestanding	<input type="checkbox"/> Projecting	<input type="checkbox"/> Suspended
<input type="checkbox"/> Awning/Canopy	<input type="checkbox"/> Directory	<input type="checkbox"/> Interpretive	<input type="checkbox"/> Roof Mounted	<input type="checkbox"/> Window

Sign Face Dimensions: Height _____ Width _____ Depth _____ Sign Material(s): _____

Height from grade to top of sign: _____ Height from grade to bottom of sign: _____

Type of Illumination: None LED Incandescent Florescent Neon Other (specify) _____

Lighting Zone and Time Limitation: Zone 1 (9:00 PM) Zone 2 (11: 00 PM) Zone 3 (11:00 PM)

Building Mounted Signs Only:
Wall length of business on primary building frontage _____ Wall length of business on secondary frontage (if applicable): _____

Freestanding Signs Only:
Total length of primary street frontage _____ Total length of secondary street frontage (if applicable) _____
Total landscaping required (sq. ft.) _____ Total landscaping provided (sq. ft.) _____



City of Flagstaff

Community Development Division

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Flagstaff, AZ 86001
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P: (928) 213-2969
F: (928) 779-7684

HPC

Date Received 02/23/2021		Application to Heritage Preservation Commission		File Number NA	
Property Owner(s) Ron Boyer		Title Property Owner		Phone (928) 853_2971	
Mailing Address 6090 W Fort Valley Ranch Rd		Email rboyer@boyerhc.com			
Applicant Venessa Northway		Title Business Owner		Phone (218) 251-0909	
Mailing Address 22 E Birch Ave		Email nestacular006@gmail.com			
Property Interest of Applicant(s) (Owner, contractual interest, or agent) Venessa Northway		City, State, Zip Flagstaff, AZ 86001			
Site Address 22 E Birch Ave		City, State, Zip Flagstaff, AZ 86001			
Project Name Juice Pub & Eatery					
Parcel Number(s) 10118002			Zoning District(s), including Overlays CB (Central Business)		
Type of HPC Application Requested:		<input type="checkbox"/> Historic Overlay District Designation (If new, Name: _____) <input type="checkbox"/> Landmark Overlay District Designation <input type="checkbox"/> Certificate of Appropriateness <input type="checkbox"/> Certificate of No Effect <input type="checkbox"/> Certificate of Economic Hardship <input type="checkbox"/> Cultural Resource Study Review - Please check all that apply: <input type="checkbox"/> Letter Report <input type="checkbox"/> Phase I <input type="checkbox"/> Phase II <input type="checkbox"/> Historic Facades and Signs Grant			
Property Information:		<input type="checkbox"/> Yes <input type="checkbox"/> No Listed on the National Register of Historic Places? (Name: _____) <input type="checkbox"/> Yes <input type="checkbox"/> No Listed on the Arizona Register of Historic Places? (Name: _____) <input type="checkbox"/> Yes <input type="checkbox"/> No Located in an existing City of Flagstaff Historic District? (Name: _____) <input type="checkbox"/> Yes <input type="checkbox"/> No Has the structure every been inventoried or evaluated for the National Register? <input type="checkbox"/> Yes <input type="checkbox"/> No Is the structure over 50 years old at the time of application? <input type="checkbox"/> Yes <input type="checkbox"/> No Was all or a portion of the structure built before World War II as housing? Is the subject property: <input type="checkbox"/> Developed <input type="checkbox"/> Vacant Land?			
Note: Applications which are incomplete or not accompanied by the required information will not be accepted.					
Property Owner Signature: 		Date: 2-26-21		Applicant Signature: Date:	
For City Use					
Date Filed: _____		HPC Hearing Date: _____			
Fee Receipt #: _____		Amount: _____		Date: _____	
Action by HPC:		<input type="checkbox"/> Consent Approval by HPO <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions			
		<input type="checkbox"/> Denied <input type="checkbox"/> Continued Staff Initial: _____ Date: _____			