



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
Site Address (including suite #) 5 E Aspen Ave		City, State, Zip Flagstaff, Arizona 86001		Parcel #
Business Name Rooster Bus	Business Owner Name Keith Herring		City License #	
Local Contact or Manager Name Keith Herring		Phone 480-247-7538	Shopping Center/Building Name	
Business Mailing Address 5 E Aspen Ave		City, State, Zip Flagstaff, Arizona 86001	E-mail signarama@sarflagstaff.com	
Total Value of Sign(s) 2651.83	Zoning District	Multi-Tenant (3 or more) Development or Shopping Center <input checked="" type="checkbox"/> Yes <input checked="" 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 IHT Enterprises LLC	Address 2333 E. Spruce Ave.	City, State, Zip Flagstaff, AZ 86004
Contact Name Jeff Wells	Phone 928-714-0740	Email jeff@sarflagstaff.com
Contractor's License # ROC 327075	City of Flagstaff Business License # BL-02369	

Description of Proposed Work:
Permanent Signage

Special Districts:

Yes No This property is in a local or national Historic District. If yes, specify: Downtown

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.flagstaffaz.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.flagstaffaz.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.

AR _____ (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: _____ Contractor Agent **Date:** 07.11.25

For City Use

Received By: _____ **Fee Receipt #:** _____

Approval: Yes 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 18.05 Width 41.87 Depth 2 Sign Material(s): HDU - Sandblasted Sign

Height from grade to top of sign: 177 Height from grade to bottom of sign: 130

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 20 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 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.) _____