City of Dover, DE
Department of Planning and Inspections
P.O. Box 475, Dover, Delaware 19903
(302) 736-7010 Fax: (302) 736-4217
www.cityofdover.gov

Permit #_____

Sign Permit Application

Applicant's Name: _____

Project Name: _____

Address: _____

Phone: _____ Dover Business License #_____

Property Owner: _____ E-mail:_____

Contractor Name: _____

Address: _____

Phone: _____ Dover Business License #:_____

E-mail:_____

Sign Information

Sign	1	2	3	4	5
New/Reface					
Type of Sign Ex. wall, monument, window, etc.					
Dimensions Length, width and depth					
Square Footage					
Setback from Right-of-Way					
Sign Material Ex., aluminum, PVC,					
Overall Height					
Clear Height Wall signs only					
Illumination Type Internal, external, LED, etc.					

For Office Use Only		**Tax Parcel #**						
Date Received:				Date Issued:				
Planner Assigned		Zoning District		Historic District	Y/N	Adj. to Residential	Y/N	Date Approved
Road Classification	UPA UMA UC	Accurate Plot Plan	Y/N/NA	Wall Elevation	Y/N/NA	Sign Elevation	Y/N	
Unified Sign#/BOA #		Application Complete	Y/N	Total # Signs		Total SF Signs		
Fee Paid	Check #	Cash	Collected By		**Permit Fee $**			

Applicant's Signature

I the undersigned do affirm that all the information provided in this application is accurate. I also affirm that I am authorized by the Property Owner and have the authority to make this application. Finally I will perform all work in accordance with the City of Dover Code and of this permit.

Signature Print Name Date

City of Dover, Delaware
SIGN TABLE

Use	Specific	Road Type	Permitted Signs Sign Type	# Permitted	Max Size	Max Height	% of Total Wall Area	Setback (R.O.W)	Exclusion Zone
Residential Uses and Non Residential Uses in Residential	Single-Family Detached/ Semi-detached	All Streets	Signs permitted in § 4.5 only						
	Professional Office	All Streets	Post or Monument	1/entrance	12 S.F.	7'	N/A	5'	20’
		All Streets	Wall	1/frontage	16 S.F.	7'	≤ 15%	N/A	N/A
	Subdivisions Multi-family residential uses Manufactured home parks	All Streets	Wall &	1/frontage	32 S.F.	N/A	≤ 15%	N/A	N/A
			Monument or post and panel	2 /entrance	32 S.F.	7'	N/A	5'	20’
Non-Residential uses adjacent to Residential Districts or uses	Places of Worship Daycare Centers Approved Conditional Uses Educational/Institutional All other approved Non-residential Uses	Urban Principal Arterial	Wall &	2/frontage	32 S.F.	N/A	≤ 15%	N/A	N/A
			Monument or post and panel OR	1/entrance	32 S.F.	7’	N/A	10'	20'
			Post ** &	1/frontage	16 S.F.	7’	N/A	5’	5’
			Pylon*	1/frontage	32 S.F.	30’	N/A	30’	50’
		Urban Minor Arterial	Wall &	2/frontage	32 S.F.	N/A	≤15%	N/A	N/A
			Monument or post and OR	1/entrance	32 S.F.	7'	N/A	5’	20’
			Post**	1/frontage	16 S.F.	7’	N/A	5’	10’
		Urban Local/ Collector	Wall &	2/frontage	32 S.F.	N/A	≤ 15%	N/A	N/A
			Monument or post and panel OR	1/entrance	32 S.F.	7’	N/A	5’	20’
			Post**	1/frontage	16 S.F.	7’	N/A	5’	10’
Non-Residential Uses in Non-Residential Districts	Non-Residential Uses	Urban Principal Arterial	Wall &	2/frontage	No max	N/A	≤15%	N/A	N/A
			Monument or post and panel OR	1/entrance	100 S.F.	10’	N/A	10’	20’
			Pylon OR*	1/frontage	100 S.F.	30'	N/A	15'	50’
			Pylon*	1/frontage	150 S.F.	30'	N/A	31'	50’
		Urban Minor Arterial	Wall &	2/frontage	64 S.F.	N/A	≤ 15%	N/A	N/A
			Monument or post and panel OR	1/entrance	64 S.F.	7'	N/A	5’	20’
			Post**	1/frontage	16 S.F.	7'	N/A	5’	20’
		Urban Local/ Collector	Wall &	2/frontage	32 S.F.	N/A	≤ 15%	N/A	N/A
			Monument or post and panel OR	1/entrance	32 S.F.	7'	N/A	5’	20’
			Post	1/frontage	16 S.F.	7”	N/A	5’	10’

* Denotes that an additional wall sign may be permitted/added in lieu of a freestanding pylon sign.
** Post sign would be lieu of a monument sign or post and panel sign.

CITY OF DOVER DEPARTMENT OF PUBLIC WORKS
PO Box 475 Dover, DE 19903
Phone: 302-736-7025 Fax: 302-736-4217

PUBLIC WORKS RENOVATION CHECKLIST FOR PLUMBING AND BUILDING PERMIT APPLICATION

The City of Dover's Water / Wastewater Handbook defines a renovation project as any project which proposes to change the character of the water and/or wastewater service at a subject location. Examples of such changes include, but are not limited to, changes in plumbing fixture quantity, changes to the size of the water line serving the location, changes to the size of the sanitary sewer line serving the location, and/or relocation of the water meter, water line and/or sewer line serving the location. All renovation projects are required to bring the component of the water and/or wastewater service to be changed up to current standards and specifications as part of the proposed project.

In order to determine if your project requiring a Plumbing or Building Permit is applicable please complete the following checklist. If you answer "Yes" to any of the questions below your project may be subject to the renovation project requirements of the Department of Public Works.

In addition to the water / wastewater concerns, the Department of Public Works is requiring further questions related to the multiple divisions within this Department. These divisions include sanitation, grounds, streets and storm sewer. Each division could be impacted by a plumbing or building permit application. The purpose for the questions related to the aforementioned divisions is to assure the City of Dover as well as the property owner, that all services to the property can be maintained according to the current code.

If there is a recorded easement on your property, such as, but not limited to, utility, cross access, drainage, then building a structure within the easement is prohibited. The purpose of an easement is to allow the proper authorities access to their infrastructure. This cannot be accomplished with a structure built above a piece of infrastructure.

This form will be forwarded to the Department of Public Works and you will be contacted directly by a representative of the Department, within five (5) business days, regarding specific requirements and additional information that may be required. All requirements will be provided under separate cover to the applicant from the Department of Public Works and copied to the Planning and Inspections Department in order to confirm completion with the Department of Public Works prior to final inspection. As such, no delay in the receipt of your Plumbing or Building Permit will occur.

THIS FORM MUST BE COMPLETED AND TURNED IN WITH PLUMBING PERMIT APPLICATION OR BUILDING PERMIT APPLICATION.

Brief Description of Work (To Be Completed by Applicant):	To Be Completed By Planning & Inspections Staff Building Permit #: Plumbing Permit #: C/O Required: Y/N

WORK SITE LOCATION	Address:
	Parcel ID:

Applicant (Owner or Contractor)	
Contact Person	
Mailing Address	
City, State, Zip	
Telephone	
Fax	
E-mail Address	

Does Your Project Propose . . .	**Yes**	**No**	**If Yes, Describe**
an increase or decrease to the quantity of plumbing fixtures at the location?	☐	☐	
a change in size of the water line serving the location?	☐	☐	
a new water irrigation system?	☐	☐	
a change in size of the sanitary sewer line serving the location?	☐	☐	
relocation of the water meter?	☐	☐	
relocation of the water line serving the location or any associated appurtenances?	☐	☐	
relocation of the sanitary sewer line serving the location or any associated appurtenances?	☐	☐	
any work within the right-of-way?	☐	☐	
any proposed sidewalk work?	☐	☐	
any proposed concrete work?	☐	☐	
any alteration to any storm drain infrastructure?	☐	☐	
any proposed curb alteration, i.e., new driveway to property?	☐	☐	
any proposed scaffolding to renovate building exterior?	☐	☐	
any proposed tree or shrub plantings within the right-of-way?	☐	☐	
an upgrade in sanitation service?	☐	☐	
a relocation of the existing trash pick-up location?	☐	☐	

EASEMENT*	**Yes**	**No**
Is there any existing easement on this property? (utility, drainage, cross access, etc.)	☐	☐

**-It is prohibited to build any structure within an existing easement.*

I hereby certify that the information provided above is correct and acknowledge that should any differences be identified throughout the course of the project that all renovation project requirements still apply.

Printed Name of Applicant _____ Signature of Applicant _____ Date _____

THIS FORM MUST BE COMPLETED AND TURNED IN WITH PLUMBING PERMIT APPLICATION OR BUILDING PERMIT APPLICATION.