

Illegal Sign Profile Sheet

Inspector Name: PERMIT SPECIALIST

Transaction #: PERMIT NUMBER

Sign Owner: OWNER NAME Phone #: OWNER PHONE

Address: OWNER ADDRESS, OWNER CITY, OWNER STATE OWNER ZIP

Land Owner: LAND OWNER NAME

Address: LAND OWNER ADDRESS, LAND OWNER CITY, LAND OWNER STA

Route: ROUTE

Log Mile: 0.0

County: COUNTY

Sec/Town/Range: _____

Picture File Name/#: _____

Inspection Date: _____

Illegality: Spacing Location No permit Not securely affixed
 On natural features Other: _____

Remedial Action: Apply for permit Removal
 Other: _____

Comments: COMMENTS

