



City of Folly Beach

21 Center Street
PO Box 48
Folly Beach, SC 29439

Sign Application

PID/Tax Map # _____ Folly Beach Business License # _____

Project/Job Address _____

Property Owner Name & Address _____

State License # (SCLLR) _____ Expiration Date _____

Applicant _____ Address _____

City _____ State _____ Zip Code _____ Phone _____

Email _____

Description of work: _____

Include materials, dimensions, and a picture or sketch of the sign. All commercial signs must receive approval from the Design Review Board.

Office Use Only	
_____ Zoning Administrator	By signing this application, I attest that all information is accurate and I will abide by all ordinances in effect at time of application. I also give permission that, as long as the permit is valid, inspectors may enter the construction project during normal business hours Print name _____ Signature _____ Date _____
_____ Building Official	
DRB Approval _____	