

CITY OF JEFFERSONTOWN

BUILDING DEPARTMENT

SIGN PERMIT APPLICATION

SIGN FOR ? NEW BUSINESS: YES ___ NO ___ REPLACEMENT or REPAIR: YES ___ NO ___
 ADDRESS: _____
 PREMISES USED FOR: _____
 APPLICANT: _____ PHONE: _____
 ADDRESS: _____
 OWNER OR LEASE: _____ PHONE: _____
 ADDRESS: _____

ALL APPLICANTS SHALL INCLUDE APPROPRIATE INFORMATION REQUIRED FOR A PERMIT. SITE PLAN SHOWING SIGN AND BUILDING LOCATIONS. BUILDING ELEVATIONS SHOWING SIZE OF BUILDING AND ATTACHED SIGN LOCATIONS. SCALE DRAWINGS OF THE SIGNS SUBMITTED.

SIGN #1 LOCATION: _____
 TYPE _____ THICKNESS _____
 HEIGHT _____ WIDTH _____ TOTAL SQ.FT. _____
 HEIGHT TO THIGHTEST POINT _____ PEDESTRIAN CLEARANCE : _____
 WIND LOAD (30 psi. or greater): _____ PERMIT FEE: _____
 TEMPORARY SIGN? YES: ___ NO ___ DEPOSIT (for temporay signs only): _____
 TOTAL FEES SIGN #1: _____

SIGN #2 LOCATION: _____
 TYPE: _____ THICKNESS _____
 HEIGHT _____ WIDTH _____ TOTAL SQ.FT. _____
 HEIGHT TO THIGHTEST POINT _____ PEDESTRIAN CLEARANCE : _____
 WIND LOAD (30 psi. or greater): _____ PERMIT FEE: _____
 TEMPORARY SIGN? YES: ___ NO ___ DEPOSIT (for temporay signs only): _____
 TOTAL FEES SIGN #2: _____

SIGN #3 LOCATION: _____
 TYPE: _____ THICKNESS _____
 HEIGHT _____ WIDTH _____ TOTAL SQ.FT. _____
 HEIGHT TO THIGHTEST POINT _____ PEDESTRIAN CLEARANCE : _____
 WIND LOAD (30 psi. or greater): _____ PERMIT FEE: _____
 TEMPORARY SIGN? YES: ___ NO ___ DEPOSIT (for temporay signs only): _____
 TOTAL FEES SIGN #3: _____

OFFICE USE ONLY

TOTAL SQ FT _____ ZONING DISTRICT _____
 PERMIT NO. _____ TOTAL PERMIT FEES _____
 TOTAL REFUNDABLE DEPOSIT: _____ DATE TEMPORARY SIGN(S) REMOVED: _____
 SIGNATURE OF AUTHORIZED AGENT _____ DATE: _____