

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 CLEARENCE : _____
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 CLEARENCE : _____
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 CLEARENCE : _____
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: _____