

## Sign Permit Application City of Muscle Shoals

Job Address:
Applicant Name:
Mailing Address:
City, State, Zip, Phone:
Property Owner:

### Sign Type and Description

On Premise Attached <input type="checkbox"/>	On Premise Detached <input type="checkbox"/>	Temporary Event New Business <input type="checkbox"/>
How Tall is Sign?  _____ FT.	Square Footage  _____ FT. <sup>2</sup>	What is the Linear Front Footage of Building?  _____ FT.
Survey Submitted? <input type="checkbox"/> Yes      No <input type="checkbox"/>	Plans Submitted?  <input type="checkbox"/> Yes      No <input type="checkbox"/>	Name of Business _____ _____
On File Bldg Dept <input type="checkbox"/>	Sign Contractor Name	Contract Price
Sign Contractor Name	Contract Price	Temporary Sign Give Beginning Date: _____
What is Total Wall Square Footage?  _____ FT. <sup>2</sup>	Is Sign to be Lighted?  <input type="checkbox"/> Yes      No <input type="checkbox"/>	Ending Date: (60 Days)

<p><b>NOTICE</b></p> <p>Sign Permits are issued for a period of six months, after which they are void. Failure to obtain a final inspection and approval will result in the sign permit being void and sign erected pursuant thereto subject to removal.</p>
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I hereby certify that I have read and this examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Application Revised September 7, 2006

Signature of Contractor or Agent

\_\_\_\_\_

Signature of Owner (Owner/Builder)

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Date \_\_\_\_\_