SIGN PERMIT APPLICATION

Telephone: (731) 425-8262 **CITY OF JACKSON** **Fax: (731) 425-8228**

BUILDING AND HOUSING CODES DEPARTMENT

INSTALLER INFORMATION

If you are the owner and are installing the SIGN yourself check here. ☐

If you are a SIGN COMPANY with an account number already assigned, please fill out the following:

ENTER YOUR JBHCD ACCOUNT NUMBER HERE:

COMPANY NAME

BUSINESS LICENSE
IF YOU ARE UNSURE AS TO WHETHER YOU NEED A BUSINESS LICENSE, PLEASE CALL (731) 425-8211 OR (731) 425-8214 FOR CLARIFICATION

If you do not have a JBHCD account number and wish to establish one please complete the following:

CONTRACTOR NAME (INDIVIDUAL'S NAME, OWNER, CONTACT PERSON, ETC.)

COMPANY NAME

ADDRESS

CITY, STATE, ZIP

PHONE NUMBER INCLUDING AREA CODE

SITE INFORMATION

PROPERTY ADDRESS (Must include street number and name)

WORK LOCATION (SPACE, SUITE OR APT #, ETC)

PROJECT NAME

PLAN REVIEW NUMBER (IF APPLICABLE)

OWNER NAME (OWNER PER DEED OR PERSON IN CHARGE OF PROPERTY)

CITY, STATE, ZIP

TELEPHONE NUMBER (INCLUDING AREA CODE

DESCRIPTION OF SIGN

"U.L. #_____ "

SIGN CLASSIFICATION

[ ] POLEGROUND SIGN* [ ] OTHER*_____
[ ] WALL SIGN*
[ ] ROOF SIGN*
[ ] MOBILE ILLUMINATED SIGN [ ] BANNER
[ ] 30 DAY [ ] 60 DAY
OFF PREMISE SIGNS REQUIRE PLAN REVIEW.
PLEASE SEE SIGN PLAN REVIEW APPLICATION

*NOTE: A DRAWING OF THE SIGN AND A SITE PLAN INDICATING THE PROPOSED LOCATION OF THE SIGN AND ALL OTHER SIGNS ON THE SITE AND THEIR SIZE (IN SQ. FT.) MUST BE SUBMITTED WITH THE SIGN APPLICATION.

COMMENTS:

THIS INFORMATION TO BE COMPLETED BY JBHCD PERSONNEL

ZONE RIGHT OF WAY

FRONT_____ RIGHT_____ LEFT_____ REAR_____

APPROVED_____ DATE_____

TOTAL SQUARE FOOTAGE OF SIGN (NOTE DEF. IN SIGN CODE 21-11)

TOTAL HEIGHT OF SIGN (NOTE DEF. IN SIGN CODE 21-5 (36) IN FEET)

IS THE PROPOSED SIGN ELECTRICALLY ILLUMINATED? [ ] YES [ ] NO

METHOD OF PAYMENT

[ ] CASH [ ] CHECK NUMBER _____ [ ] BANK DRAFT

-VALUATION OF TOTAL PROJECT:
MUST INCLUDE ELECTRICAL WORK

SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL WORK

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THE TYPE WILL BE COMPLETED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOENS NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAWS REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

IF BANK DRAFT IS INDICATED UNDER METHOD OF PAYMENT, I DO HEREBY AUTHORIZE PAYMENT OF THIS PERMIT FEE BY A BANK DRAFT ON MY BANK ACCOUNT

I FULLY UNDERSTAND THAT ALL ELECTRIC SIGNS MUST BE LISTED BY AN APPROVED AGENCY.

SIGNATURE *DATE*

**** I HEREBY CERTIFY THAT I WILL COMPLY WITH THE TERMS AND CONDITIONS OF THE CITY'S SOLID WASTE CONTRACT WITH WASTE MANAGEMENT FOR THE HAULING AND DISPOSAL OF ALL SOLID WASTE IN CONNECTION WITH THE PROJECT. I CERTIFY THAT I WILL PROVIDE THE CITY WITH A MANIFEST FOR THE DISPOSAL OF ANY AND ALL LOADS OF RECYCLABLE MATERIALS FROM THE PROJECT THAT ARE NOT DISPOSED OF THROUGH WASTE MANAGEMENT. I CERTIFY THAT ANY SUB-CONTRACTORS USED FOR THE PROJECT WILL HAUL ONLY THE PORTION OF THE MATERIALS DIRECTLY RELATED TO THE PORTION OF THE PROJECT THEY PERSONALLY COMPLETED, AND THAT SAID SUB-CONTRACTOR MUST PROVIDE THE CITY WITH A MANIFEST OF THE CONTENTS AND TONNAGE OF ANY SUCH LOAD NOT DISPOSED OF THROUGH WASTE MANAGEMENT.