CITY OF PASS CHRISTIAN

200 West Scenic Drive, Pass Christian , Mississippi 39571 (228) 452-3324

SIGN PERMIT APPLICATION VER. 2011

Please read and fill in ALL information that is requested. Failure to complete this application may result in a delay in issuiug the desired permit.

*****CALL BEFORE YOU DIG! 1-800-227-6477*****

PLEASE PRINT LEGIBLY

PROPERTY INFORMATION

BUSINESS STREET ADDRESS: _____

BUSINESS AD VALOREM TAX PARCEL NUMBER: _____

(REQUIRED FOR ISSUANCE)

ZONING DISTRICT: _____

PROPERTY OWNER NAME: _____
Last First

ADDRESS: _____
Street City State Zip

PHONE NO: (_____) _____

CONTRACTOR INFORMATION(if applicable)

CONTRACTOR COMPANY NAME: _____

PHONE NO:(_____) _____

CONTRACTOR NAME: _____
Last First

ADDRESS: _____
Street City State Zip

SITE PLAN

I HEREBY CERTIFY THAT I HAVE READ THIS APPLICATION AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT; THAT I AGREE TO COMPLY WITH ALL APPLICABLE CODES, ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION; THAT I AM THE OWNER OR AUTHORIZED TO ACT AS THE OWNER'S AGENT FOR THE HEREIN DESCRIBED WORK; AND THAT THE TOTAL CONTRACTOR VALUATION IS: $ _____

DATE: _____ SIGNATURE: _____

SIGN MATERIAL:

- ☐ WOOD
- ☐ METAL
- ☐ BRICK
- ☐ OTHER _____

LOCATION DESIGNATION:

- ☐ ON-PREMISES SIGN
- ☐ OFF-PREMISES SIGN (MAX. 6 MONTHS)

Location(s):

_____

_____

TYPE:

- ☐ NEW SIGN CONSTRUCTION
- ☐ ALTERATION OF EXISTING SIGN
- ☐ REPAIR OF EXISTING SIGN
- ☐ RELOCATION OF EXISTING SIGN

COLOR:

- ☐ FREE STANDING
- ☐ WALL MOUNTED
- ☐ MONUMENT
- ☐ LIGHTED
  - ☐ INTERNAL
  - ☐ EXTERNAL

ADDITIONAL INFORMATION:

_____

_____

_____

_____

_____

DISPLAY AREA (SQ. FT.):

LEGNTH:	WIDTH:	HEIGHT:

ARE ANY STRUCTURES EXISTING ON PROPERTY? (Y/N):

OFFICE USE ONLY

APPROVED BY PLANNING: _____ APPROVED DATE: _____

APPROVED BY SIGN CHAIRMAN: _____ APPROVED DATE: _____

APPROVED BY CODE ENFORCEMENT: _____ APPROVED DATE: _____

******STAFF APPROVAL OF THIS APPLICATION EXPIRES AFTER 45 DAYS IF A PERMIT IS NOT ISSUED******