



SIGN / BILLBOARD APPLICATION

DATE: _____ Zoning District _____ Permit # _____

Applicant _____ Phone _____ E-mail _____

Address _____ City _____ State _____ Zip _____

Business / Firm _____

Proposed Sign Location _____

Legal Description _____

PIN # _____ Property Owner _____

Owner Address _____ City _____ State _____ Zip _____

Phone _____ E-mail _____

TYPE SIGN

() Billboard () Projecting () Roof () Ground () Marquee

() Wall () Portable () Electrical

CONSTRUCTION DOCUMENTS ATTACHED

() Site Plan () Dimensional Drawings () Materials – Construction Details

() Loads – Stresses – Anchorage () Identification Information

INSURANCE COVERAGE

Insurance Company _____ Agent _____

Address _____ Phone _____

Amount of Coverage _____

Applicant hereby certifies that all the information provided herein to be correct and that all pertinent state and city ordinances, codes, resolutions, statutes and rules will be complied with in performing the work for which this permit would be issued.

Applicant Signature _____ **Date** _____

Mount Carmel City Council Action _____ **Date** _____