Fee _____
Date _____
Sign District _____

Permit No. _____
Map _____
Parcel No. _____
Zoning _____
County _____

Application For Sign Permit

CITY OF GOODLETTSVILLE, TENNESSEE

JOB ADDRESS			
1. OCCUPANT			
2. OWNER	MAIL ADDRESS	ZIP	PHONE
3. CONTRACTOR	MAIL ADDRESS	PHONE	LICENSE NO.
4. ARCHITECT OR DESIGNER	MAIL ADDRESS	PHONE	LICENSE NO.
5. WORDING			
6. TYPE ILLIMINATION (FLASHING PROHIBITED)	TYPE PERMANENT SIGN	TEMPORARY	
7. PROJECTING	WALL	SINGLE FACE	MARQUEE
GROUND	POLE	DOUBLE FACE	OTHER
8. ESTIMATE OF VALUATION OF WORK		EXISTING SIGNS	
APPROVAL FOOTING FINAL		ISSUED BY	
SPECIAL CONDITIONS			

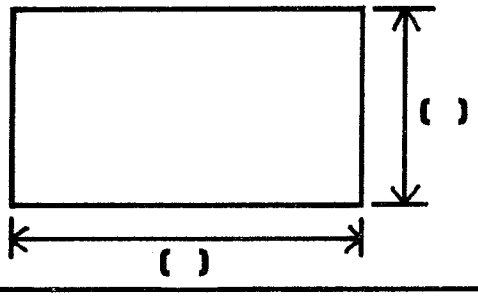
OWNER

JOB ADDRESS

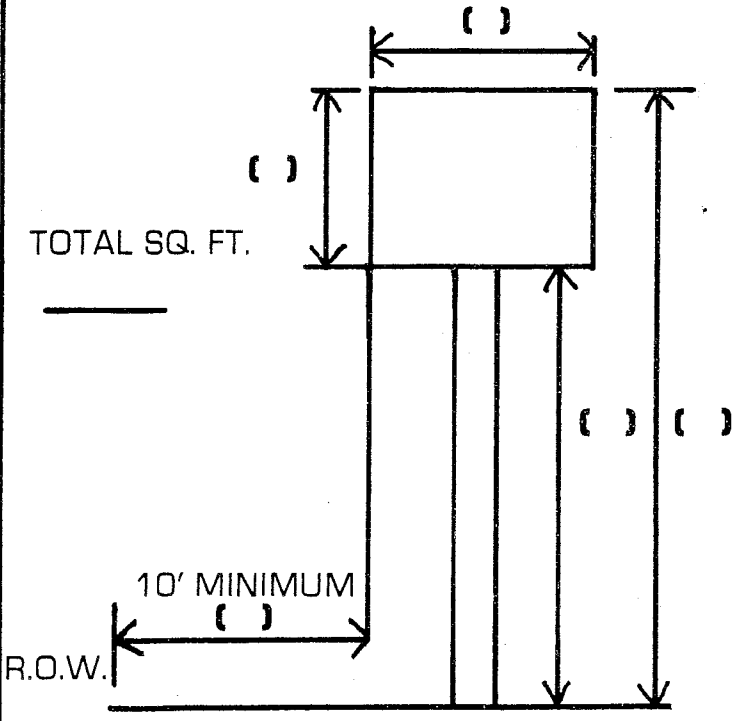
WALL SIGN

TOTAL SQ. FT.

_____



FREESTANDING SIGN



NOTICE

THIS PERMIT BECOMES NULL AND VOID IF WORK ON CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 3 MONTHS.

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 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.

_____
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT DATE

_____
SIGNATURE OF OWNER (IF OWNER BUILDER) DATE