



SIGN PERMIT APPLICATION

JEFFERSON – TALMO PLANNING & DEVELOPMENT



Please complete all sections. Provide all required information and attachments. Completed applications may be submitted to Jefferson City Hall, 147 Athens Street, Jefferson, GA 30549. Incomplete applications will not be processed.

APPLICANT INFORMATION:

Name of Business: _____

Address: _____

CityStateZip

Business Phone #: _____ Fax #: _____

Email: _____

Contact Person: _____ Contact #: _____

Are you the property owner? ☐ Yes ☐ No ☐ Shared Ownership

Note: If you are not the property owner, you must submit evidence of approval by the property owner to erect the sign proposed.

OWNER CERTIFICATION:

I hereby certify with the signature below that I am the owner of the property on which the sign applied for will be placed, or if I am not the property owner, I have secured permission from the property owner (submit evidence of approval).

 Print Name Here

 Signature

PROPERTY OWNER INFORMATION: ☐ Owner information is the same as the applicant section above

Property Owner: _____

Address: _____

CityStateZip

Contact #: _____ Fax #: _____

Email: _____

SIGN CONTRACTOR:

Sign Company: _____ Contact Person: _____

Address: _____

CityStateZip

Contact #: _____ Business License #: _____

SIGN LOCATION INFORMATION:

Tax Map: _____ Parcel Number: _____

Road Frontage (name of street/highway): _____

Road Characteristics: ☐ Local Road ☐ State Route (2-3 lanes) ☐ (4 lanes + or divided)

Nearest Cross Street: _____ Existing Zoning of Property: _____

Existing Use of Property: (select one)

- ☐ Non-residential, one use on property ☐ Residential, Single Family ☐ Agricultural
- ☐ Non-residential, multi-use/multi-tenant ☐ Residential, Multi-Family ☐ Vacant/Undeveloped

Is this location within a historic district? (consult with staff or view [map of Jefferson Historic Districts](#), if needed)

- ☐ Yes ☐ No **Note:** If located within a historic district, Certificate of Appropriateness is required and subject to approval from the Historical Preservation Committee

EXISTING SIGNAGE INFORMATION:

Describe the existing sign(s) now located on the property. Note: in lieu of a written description you may attached photographs of such signs. Your information is subject to verification in the field:

TYPE OF SIGN APPLIED FOR: (Note: If unsure of the sign type, please ask staff or consult the definitions in Article 17 of the Land Use Management Code)

- ☐ Ground Sign ☐ Temporary Sign (sale, rent, construction) ☐ Special Event
- ☐ Wall Sign ☐ Temporary Sign (other) ☐ Other:

SIGN CHARACTERISTICS:Will sign be illuminated? ☐ Yes ☐ No If yes, an electrical permit will be required.

Height (Ft.) - For ground signs only: _____ Ft. Size of the sign (Sq. Ft.) - Measure one face: _____ Sq. Ft.

Dimensions of the sign (area): _____ by _____ ☐ feet ☐ inches

Estimated cost of construction: \$ _____

ADDITIONAL APPLICATION MATERIALS REQUIRED:

- ☐ A drawing of the sign or other information which shows the height of the sign, the area of the face of the sign, the color scheme of the sign, and the structural supports of the sign, all drawn to an engineering or architectural scale.
- ☐ A boundary survey or tax plat of the property on which the sign will be located which shows where thereon the sign will be located and, in the case of ground signs, the distance from the property lines and the street right-of-way and street pavement
- ☐ Consent of the owner, or his agent, granting permission for the placement or maintenance of the subject sign, which may include a copy of the lease or other document from the owner of the sign which authorized the erection thereof.

CERTIFICATION AND INDEMNITY:

THE APPLICANT SHALL BE RESPONSIBLE FROM THE DATE OF THIS PERMIT, OR FROM THE TIME OF THE BEGINNING OF THE FIRST WORK, WHICHEVER SHALL BE THE EARLIER, FOR ALL INJURY OR DAMAGE OF ANY KIND RESULTING FROM THIS WORK, WHETHER FOR THE BASIC SERVICES OR ADDITIONAL SERVICES TO PERSONS OR PROPERTY, THE APPLICANT SHALL EXONERATE, INDEMNIFY AND SAVE HARMLESS THE CITY, QUAD CITIES PLANNING COMMISSION AND ITS EMPLOYEES FROM AND AGAINST ALL CLAIMS OR ACTIONS, AND ALL EXPENSES INCIDENTAL TO THE DEFENSE OF ANY SUCH CLAIMS, LITIGATION, AND ACTIONS, BASED UPON OR ARISING OUT OF DAMAGE OR INJURY (INCLUDING DEATH) TO PERSONS OR PROPERTY CAUSED BY OR SUSTAINED IN CONNECTION WITH THE PERFORMANCE OF THIS PERMIT OR BY CONDITIONS CREATED THEREBY OR ARISING OUT OF OR IN ANY WAY CONNECTED WITH WORK PERFORMED UNDER THE PERMIT WITH THE ACQUISITION OF AND CONSTRUCTION UNDER THE PERMIT AND SHALL ASSUME AND PAY FOR, WITHOUT COST TO THE CITY, QUAD CITIES PLANNING COMMISSION AND ITS EMPLOYEES, THE DEFENSE OF ANY AND ALL CLAIM, LITIGATIONS, AND ACTIONS, SUFFERED THROUGH ANY ACT OR OMISSION OF THE APPLICANT OR ANY SUBCONTRACTOR, OR ANYONE DIRECTLY OR INDIRECTLY EMPLOYED UNDER THE SUPERVISION OF ANY OF THEM.

I HEREBY CERTIFY THAT I HAVE EXAMINED AND UNDERSTAND ALL INFORMATION ON THIS APPLICATION AND THAT THE ABOVE STATEMENTS AND INFORMATION SUPPLIED BY ME ARE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING WORK TO BE PERFORMED SHALL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT.

Print Name

Applicant Signature

Date

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