



APPLICATION FOR SIGN PERMIT CITY OF MADISONVILLE

P.O. Box 705
Madisonville, KY 42431
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Application No. _____

Date: _____

Applicant's Name: _____ Phone #: _____ Cell #: _____
Address: _____ City: _____ State: _____ Zip: _____

Business Owner's Name: _____ Phone #: _____ Cell #: _____
Address: _____ City: _____ State: _____ Zip: _____

Contractor: _____ Phone #: _____ Cell #: _____
Address: _____ City: _____ State: _____ Zip: _____
Contractor's Bus. Lic. (M'ville) Acct. #: _____ Email: _____
Work Comp. & Liab. Ins. Carrier: _____ Exp. Date: _____
(A certificate of insurance must be provided)

Address Proposed Sign: _____
Name of Business: _____
List Size and Type of Proposed Sign(s): _____

List Size and Type of Existing Sign(s): _____

Building Wall Size(s): _____

Attach a drawing of all signs showing type, size, and height; also include a site plan showing location of all sign(s), both existing and proposed on the property, including accurate measurements from the property lines to all free-standing signs. In addition, if applying for a wall sign, include the dimensions of the wall of the building to which the sign will be attached and its projected distance.

I agree, that as the business owner or authorized agent of the business owner, that the above information is, to the best of my knowledge, true and correct. It is understood and agreed that any error, misstatement or misrepresentation of fact, or any alteration of change in plans made, without the Zoning Administrator's approval after issuance of the Sign Permit, shall constituted sufficient grounds for the revocation of such permit.

Date: _____ Applicant's Signature: _____

FOR OFFICIAL USE ONLY

Permit Fee: _____ Date Paid: _____ Date Issued: _____ Zoning: _____ PVA #: _____

Conditions/Comments (if any): _____

Permit Fees for Each Sign:
32 sq. ft. & less \$25
33 to 50 sq. ft. \$50
Over 50 sq. ft. \$100
(Make checks payable to: City of Madisonville)

Signed: _____
Debbie Todd, Zoning Administrator