## **TOWN OF JEFFERSON - SIGN PERMIT APPLICATION**

Name of Applicant:		
Name of Business:		
State: Zip:	Phone Number:	()
Fax Number: ()		
	ore than one location, list all locations. (	
Proposed Size of Signage- If more th	aan one sign, list size of each sign. (ex.	
	,,, _,, _	
If a sign company/contractor is bein	ng used for sign production, please li	ist their contact information below.
Name of Sign Company/Contractor	r:	
Contact Person:		
Phone Number: ()		ber: ()
Email Address (ij <i>applicable</i> ):		
Signature of Applicant:		Date:
	mply with the Zoning District's sign reg prementioned regulations that pertain t	ulations that are applicable and understand to the district.
	t application fee is required at th re permissible, each additional sign	
Office Use Only		
Parcel #:	Currently Zoned:	
Physical Use of Property:		-
	submitted conform to the Town sign o \$50 Sign Permit Fee P	ordinances): Approved   Denied 2aid? Y N Waived   Cash Check #
Zoning Enforcement Officer's sig	gnature:	Date:
	P.O. Box 67, Jefferson, NC 28 Phone: (336) 846-9368 Email: clerk@townofjeffersor	