Permit # _____

Application for a Permanent Sign Permit

602 S. Main St. 4th Floor, Joplin, MO | 417-624-0820 ext. 1511 | Zoning-Planning@JoplinMO.org

Project Address: _____

Owner: _____ Address: _____

Phone No.: _____ Email: _____

Applicant: _____ Address: _____

Phone No.: _____ Email: _____

Sign Contractor: _____ License No.: _____

Electrician: _____ License No.: _____

Phone No.: _____ Email: _____

Type of Work: New Sign □ Alteration □ Repair □

Type of Sign:

□ Attached/Wall Sign: Sign mounted to wall, parallel with wall; includes painted, etched on

□ On-premises Detached: Freestanding sign advertising service or product located on the same property.

□ Off-premises Detached/Billboard: Freestanding sign advertising service or product NOT located on the same property.

□ Projection Sign: Attached to wall and projects perpendicular from face of wall.

□ Roof Sign: Attached to and located above roof.

Sign Details:

Size (sqft): _____ Dimensions: _____

Height above grade of **lowest** part of sign: _____

Height above grade of **highest** part of sign: _____

Projection beyond building line: _____ Weight: _____

Type(s) of materials: _____ Type(s) of illumination (If existing please indicate): _____

Additional Comment:_____

_____

Existing Signs:

None: □ Detached Sign Size:_____

Wall Sign Size:_____ Other Sign Size:_____

Submission of Documents:

□ Completed and signed application.

□ A drawing indicating the sign location on the building, the height and width of the building face on which the sign will be attached, and the location on the site the sign will be.

□ For detached signs, a site plan indicating proposed location showing property lines, setback lines, adjoining streets, setbacks from power lines, and setbacks from existing detached signs.

□ For detached signs over 10' in height, drawings showing details of construction, including loads, stresses, and anchors. Must be sealed by a Missouri registered design professional.

Installation:
All detached signs **require** a footing inspection prior to the concrete being poured. For footing and electrical inspections call 417-624-0820 Ext. 1521.

I hereby certify the owner of record authorizes the proposed sign, and I have been authorized by the owner to make this application as his authorized agent, and we agree to conform to all applicable laws of this jurisdiction.
Signature of Applicant_____ **Date**_____

Office Use Only

Zoning approved by: _____ Title: _____

Signature: _____ **Date:** _____

Building approved by: _____ Title: _____

Signature: _____ **Date:** _____

Historic approved by: _____ Title: _____

Signature: _____ **Date:** _____

Public Works approved by: _____ Title: _____

Signature: _____ **Date:** _____