

TARA LAMBETHPHD, AICP, CFM
Director

SIGN PERMIT APPLICATION

TO SUBMIT APPLICATION ONLINE VISIT WWW.MYGOVERNMENTONLINE.ORG

| OFFICE USE ONLY | | | |
|---|---|--|--|
| Docket No: | Date Requested: | | |
| Parcel #: | Zoning District: | | |
| Council District / At Large: | | | |
| Certificate of Appropriateness Rec'd: Y / N | Historic District: Y / N Design Rev. Corridor: Y / I | | |
| APPLICATION FOR: □ DETACHED SIG | GN □ ATTACHED SIGN □ BILLBOARD | | |
| APPLICANT INFORMATION | | | |
| Name: | | | |
| Mailing Address: | | | |
| Phone: | Email: | | |
| PROPERTY OWNER INFORMATION (ALL owners mus | st be listed and must sign) | | |
| | authority of the applicant to act on behalf of the property owner been signed, dated, and notarized endorsement? Complete page 3. | | |
| Name: | | | |
| Mailing Address: | | | |
| Phone: | Email: | | |
| TENANT INFORMATION (if applicable) | | | |
| Name: | | | |
| Mailing Address: | | | |
| Phone: | Email: | | |
| CONTRACTOR INFORMATION | | | |
| Business: | Name: | | |
| Mailing Address: | License #: | | |
| Phone: | Email: | | |
| | | | |
| Applicant's Signature | Date | | |



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|--|---|--|
| Docket No: | | |
| SIGN INFORMATION | | |
| 1. Sign location address: | | |
| 2. Sign value: \$ | | |
| 3. Total square footage of sign: | | |
| 4. Linear footage of building: | | |
| 5. Linear footage of lot: | | |
| | | |
| • • | | |
| SUBMITTAL REQUIREMENTS | | |
| ☐ Completed and signed application. | | |
| ☐ Recorded copy of Act of Sale, Judgment of | f Possession, or Deed to the property. | |
| ☐ Sign plans. Please contact South Central P reviewed by the Planning & Zoning Depart ☐ Copy of Contractor's License. | lanning for any plan review questions at 985-655-1070. Plans will also be tment for compliance with the Code. | |
| ☐ Completed and signed Owner's Endorsem | ent. | |
| ☐ Payment of fees; payable by credit card, c | heck or money order to: "St. John Parish Council". | |
| FEES | | |
| 1. Attached Sign | \$ 100.00 | |
| 2. Detached Sign / Billboard | \$ 300.00 | |
| 3. Planning & Zoning Inspection Fee | \$ 50.00 | |
| 4. Technology Fee | \$ 10.00 | |
| property. Any action of the Parish in this matter does not: (1) imp | wed the title of any portion of land in this application, or any restrictive covenants or restrictions placed on said by that the applicant's title or ownership is valid, (2) that there are or are not any restrictive covenants or other restrictions that may be on said property are enforceable or are not enforceable. | |
| NOTE: Within sixty (60) days of submission of minimum appliagrees and understand that all permit fees are non-refundable. | ication requirements, this application will become null and void. By signature of this application, the applicant | |
| Applicant's Signature | | |



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|---|-------------------------------------|----------------------|--|
| Docket No: | - | | |
| | | | |
| <u>o</u> | WNER'S ENDORSEMENT | | |
| | (please print clearly) | | |
| 1 | being duly sworn, depose that I res | ide at | |
| Owner(s) / Corporation | | Saulta Bartal | |
| Street | ,City | in the Parish | |
| of | and State of State | and that I am | |
| | | nt I have authorized | |
| the owner of the property described as | Address | it mave dumonized | |
| Applicant | to make the foregoing petition fo | or a Sign Permit. | |
| | | | |
| | | | |
| Signature of owner(s) of property or authorized agent | | | |
| SWORN TO ME THISDAY OF | | | |
| | | | |
| NOTARY PUBLIC | | | |
| Print name of Notary: | | | |
| Par roll # | | | |