

"Preserving Our Past, Enriching Our Present, Building Our Future"

33 Broadway, Jackson, CA 95642-2301 (209) 223-1646 / Fax (209) 223-3141 e-mail: cinfo@ci.jackson.ca.us

CITY OF JACKSON

APPLICATION FOR COMMERCIAL SIGN

PROPERTY OWNER:
Name:
Address:
City:
Phone:
Email:
APPLICANT REPRESENTATIVE:
Name:
Address:
City:
Phone:
Email:
BUSINESS LOCATION:
Address:
APN:

REQUIRED ATTACHMENTS:

- 1. A dimensioned, colored representation of the proposed sign. Identify the outer dimensions of the sign and the size (height) of all letters and logos. The representation should show the proposed color(s) as accurately as possible.
- 2. An elevation and plot plan of the storefront showing the proposed location of the sign. A

clear photograph can substitute for the elevation.

- 3. For hanging signs submit a dimensioned design of the bracket or support for the hanging sign.
- 4. For businesses with multiple signs (existing or proposed) please provide the dimensions of all signs (including window signs) along with the length of the building with street frontage.
- 5. For mounted signs or signs with illumination, please attach a completed Building Permit Application with drawings showing electrical design, footings, materials etc.
- 6. The Sign Permit Application processing fee is due upon application. If the proposed signage requires a Building Permit, the appropriate building permit fees are collected separately and determined by the building fee schedule.

I attest under penalty of perjury to the truth and correctness of all facts, exhibits, maps, and attachments presented with and made a part of this application.

Signed: _____

Date: _____

PROPERTY OWNER

(A Property owner's representative can sign if the property owner provides a consent letter)

FOR OFFICIAL USE ONLY

Date:	
Defer	
Date:	
	Date: Date: