



DEPARTMENT BUILDING AND CODE ENFORCEMENT  
CITY OF LUCEDALE  
SIGN PERMIT APPLICATION

PERMIT DATE \_\_\_\_\_

PERMIT# \_\_\_\_\_  
AMOUNT PAID \_\_\_\_\_

Please fill in the blanks below with legible, ink writing.

Sign Site (Address) \_\_\_\_\_

Lot # \_\_\_\_\_

Zoning \_\_\_\_\_

Sign Site Owner \_\_\_\_\_

Phone # \_\_\_\_\_

Sign contractor \_\_\_\_\_

Phone # \_\_\_\_\_

Applicant's Address \_\_\_\_\_

Type of sign: Ground  Wall  Projecting  Marquee  Other

Is sign illuminated: Yes  No

Sign Size \_\_\_\_\_ x \_\_\_\_\_ SQ. FT. \_\_\_\_\_ Height \_\_\_\_\_

Estimated cost of sign: \$ \_\_\_\_\_

If this sign is not erected within six (6) months this permit will be void, and you will be required to purchase a new permit.

Please read carefully and sign below.

Application is hereby made for a sign permit under the provision of an ordinance of the City of Lucedale and the undersigned applicant hereby represents that all answers to questions herein propounded and maps attached are true, that the permit applied for, if granted on the representation herein made; and that any permit issued hereunder may be revoked without notice on a breach or representation condition.

I, the undersigned, as owner, applicant, or contractor understand that I am responsible for any damage incurred while installing the sign including but not limited to: digging, hanging, drilling etc., if I have not contacted MS-ONE-Call at 1-800-227-6477 to have lines located before work is started.

Applicant/Contractor Signature \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Do not write below this line. City of Lucedale, Department of Building and Zoning Code Inspection Use Only.

Zoning, Code, and Building Inspections

Inspected By: \_\_\_\_\_  
Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of Approval \_\_\_\_\_  
Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Inspected By: \_\_\_\_\_  
Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Inspected By: \_\_\_\_\_  
Date: \_\_\_\_/\_\_\_\_/\_\_\_\_