



PO Box 369  
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# Sign Permit Application

## JURISDICTION OF RHEA COUNTY

DATE: \_\_\_\_\_ ZONING REFERENCE \_\_\_\_\_

MAP \_\_\_\_\_ GROUP \_\_\_\_\_ PARCEL \_\_\_\_\_ SIGN PERMIT #: \_\_\_\_\_

Job Address: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Telephone Number \_\_\_\_\_ Alternate Number \_\_\_\_\_

Sign Contractor Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Telephone: \_\_\_\_\_

Use Of Business: \_\_\_\_\_

Class of Work: New ☐ Addition ☐ Alteration ☐ Remove ☐

Brief Summary of work to be completed \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total cost of permit \$ \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_

(Authorized Person Completing Work)