



**FRANKLIN COUNTY
PLANNING & BUILDING CODES
DEPARTMENT**
321 West Main Street
Frankfort, KY 40601
Phone: (502) 875-8701
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www.franklincounty.ky.gov

OFFICE USE ONLY

Received: ____/____/____

Payment Amt: \$_____
\$.50 per sq ft. or \$35 min.
Receipt #: _____
Meeting: _____

SIGN PERMIT APPLICATION

Date: _____

1. **Address of Sign Location:** _____

2. **Applicant Information:**

- Applicant/Business name: _____
- Mailing address: _____
- Phone #: _____ Owner of Property: _____
- Sign Contractor: _____
- Address: _____ phone # _____
- Franklin County Business License Yes No

3. **Site/Building Information**

- Linear footage of lot (along street): _____
- Width of bldg. facade(s) _____
- Width of tenant space to which sign(s) will be attached _____
- Floor area of building (1st floor only): _____ Bldg. height: _____

4. **Sign Specifications**

- Sign Type: Pole/Pylon Building Fascia Ground/Monument
 Directional Special Purpose Projecting Temporary
- # of Existing Signs _____ Dimensions of each: _____
- # of Proposed Signs _____ Dimensions of each: _____
- Total Existing Square Footage of signs: _____ (not required for PC,PR,or PM)
- Total Proposed Square Footage of signs: _____
- Clearance below proposed sign: _____ Height of proposed sign _____
- Are any of the existing signs non-conforming? Yes No not known

REQUIRED ATTACHMENTS:

- Sketch of proposed sign showing sign message and dimensions;
- Sketch showing sign placement on building facade, OR sketch of site showing sign location on property, with setback distances from property lines indicated (whichever is applicable).

APPLICANT'S SIGNATURE: _____

FOR OFFICIAL USE ONLY

Permit # _____ Permit Fee: _____ Zone District: _____
Setback Requirements: Front _____ Side _____ Rear _____
Comments: _____
Planner Review: Approved Denied Name: _____ date: _____
Building Inspector Review (if applicable): Approved Denied initials _____ date _____
Electrical Inspector Review – Final: Approved Denied initials _____ date _____