BANNER SIGN PERMIT APPLICATION

City of Starkville

110 West Main Street Starkville, MS 39759 Ph:662.323.2525

Email: buildingdept@cityofstarkville.org



	APPLICANT'S INFORMATIO	N
Name: Company or Organization Name:		Phone:
Email:		
Address:		
PROPERT	TY OWNER'S INFORMATION (IF	NOT APPLICANT)
Name:		Phone:
Email:		
Address:		
	PROPERTY INFORMATION	N
Property Address:		
Parcel Number:	Cur	rent Zone District:
	BANNER SIGN INFORMATION	ON
Banner Width in Feet:	Banner Height in Feet:	Banner Square Footage in Feet:
Start Date for Banner Display:	End Date for B	anner Display:
How many Banner Signs have been place	ed on the property this year?	
How many banner permit periods are bei	ng requested?	_
For Non-residential Districts and Mixed-u	se Districts:	
<u>'</u>		period with a maximum of six (6) permit periods
For Residential Districts: The maximum duration for any banner sign year.	ı shall be three (3) days per permit pe	eriod with a maximum of six (6) permit periods per
Applicant's Signature:	Property Owner's Signature:	(required if not applicant)