

City of New Albany  
APPLICATION FOR SIGNAGE

**Date:** \_\_\_\_\_

**Applicant:** \_\_\_\_\_

**Contact Phone:** \_\_\_\_\_

**Contact Email:** \_\_\_\_\_

**Location of Property:** \_\_\_\_\_

**Zone where sign is to be installed:** \_\_\_\_\_

**Owner of Building:** \_\_\_\_\_

**Owner's Address:** \_\_\_\_\_

**Tenant:** \_\_\_\_\_

**Tenant's Address:** \_\_\_\_\_

**Type of Sign:** Wall \_\_\_\_\_ Free Standing \_\_\_\_\_ Window \_\_\_\_\_

**Electric:** Yes \_\_\_\_\_ No \_\_\_\_\_

**Lighting:** Yes \_\_\_ (Internal \_\_\_ External \_\_\_ Halo \_\_\_) No \_\_\_

Digital Display \_\_\_\_\_ Message Center \_\_\_\_\_

**Building Size:** Front Width: \_\_\_\_\_ FT. Back Width: \_\_\_\_\_ FT.

**Side of Building:** Left \_\_\_\_\_ FT. Right: \_\_\_\_\_ FT.

**Window Size:** Width \_\_\_\_\_ FT. Height \_\_\_\_\_ FT.

**Total SQ. FT.** \_\_\_\_\_

Description of Signage:

Size: (of each if more than one sign) \_\_\_\_\_

---

---

Materials Used: \_\_\_\_\_

Text or Graphics to be used: \_\_\_\_\_

---

Sign Company making, installing, or maintaining a sign within the city must be Licensed and Bonded with the City of New Albany:

Name of Sign Company: \_\_\_\_\_

Address of Sign Company: \_\_\_\_\_

Phone # of Sign Company: \_\_\_\_\_

**Attach a rendering of the signage to show location of sign on building, proportion of sign to building, and the text or graphics being used.**

**Applications for Main Street District signage must go before the Main Street Sign Committee and the Historic Preservation Committee for approval.**

**Any questions contact the Zoning Administrator at 662-538-4108 or PO Box 56 New Albany, MS 38652**