



APPLICATION FOR SIGN PERMIT

Town of Augusta
P.O. Box 42, Augusta, Missouri 63332
townofaugustamo@gmail.com

For Office Use Only		
Approved	Permit No.	
	Town Clerk Signature:	Date:
Denied		

Applicant / Owner Information

Sign Address:	If the applicant does not own the property, the attached verification must be completed and returned with this application.
Does the applicant own the property? yes no	
Applicant:	Property Owner:
Address:	Address:
City, State, Zip:	City, State, Zip:
Phone:	Phone:
E – Mail:	E – Mail:

Application to:	Detailed Sign Information			
Erect new sign	Sign setback from Property Line:	Front	Side	
Modify existing sign	Material sign is made of:			
Method of Support:	Location of sign placement:			
Post	Direction sign faces:	North	South	East West
Hanging	Dimensions of sign face:	Width		Height
Affixed to existing structure	Height of sign above grade:	Height		

APPLICATION MUST INCLUDE:

- Picture or detailed drawing of sign
- Written approval of property owner, if applicant is not the property owner
- Application Fee: \$10 for on – premise, \$25 for off – premise

Please return all required documents to the Zoning Commissioner at:
P.O. Box 42, Augusta, MO 63332

The Zoning Commissioner shall forward application to Town Board for approval or denial.

_____	_____
Signature of Applicant or Applicant's Representative	Date

Printed Name	



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VERIFICATION

(1) I am or my business or organization is the owner of the real estate located at _____ in the Town of Augusta, Missouri; (2) I am over 18 years of age and competent to make this verification; (3) I have personal knowledge of the factual statements in the attached application; (4) those factual statements are true; and (5) I authorize and approve of the attached application.

Property owner signature

Name of person signing this Verification, if property owner is a business or organization:

Role of person signing this Verification, if property owner is a business or organization:
