

Code Enforcement Division
100 Fifth Street
Henderson, KY 42420
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831-1271 Email:
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CITY OF HENDERSON
PERMIT APPLICATION
Building Mounted Sign

☐ New ☐ Replacement



I. Sign Location

Address _____

Cost of Sign \$ _____

II. Contact Information

Applicant

Name _____

Email _____

Address _____

Phone # _____

Building Owner

(If different than
Applicant)

Name _____

Email _____

Address _____

Phone # _____

General Contractor

Name _____

Email _____

Address _____

Phone # _____

Henderson Contractor Registration # _____ Henderson OL # _____ Workman's Comp _____ Affidavit _____

III. Project Description

PERMIT REQUIREMENTS FOR BUILDING MOUNTED SIGNS	
*** Please fill out a separate application for each additional sign on this property. ***	<p>___ Elevation drawing showing length, width and location of all existing signs along with location of proposed sign</p> <p>___ Existing wall dimensions</p> <p>___ Copy of proposed sign face</p>

A. SIGN DIMENSIONS

Length In Ft: _____
Width in Ft: _____
Total Square Ft. _____
Height from Grade _____

B. WALL DIMENSIONS

Length In Ft: _____
Height in Ft: _____
Total Square Ft. _____

Existing signage on property:

Y or N _____
of signs _____
Total Square Ft. _____

VI. Affirmation Statement

The owner of this building and undersigned do hereby covenant and agree to comply with all the applicable regulations pertaining to building, zoning and to construct the proposed building or structure to make the proposed change or alteration in accordance with the plans and specifications submitted herewith and certify that the information and statements given on this application, drawings and specifications are, to the best of my knowledge, true and correct, and that the proposed change or alteration will not alter the existing drainage patterns.

Application by _____

Date _____

Owner or Agent's Signature

For Office Use	Admin Hold _____
Zone: _____ PID#: _____	Flood Plain: ___ Yes ___ No
Permit Type: _____	Variance/CUP: ___ Yes ___ No
Jurisdiction: State _____ Local _____	
Permit #: _____	Fee: \$ _____