

**STONES RIVER MALL**  
**ON-SITE PERMANENT SIGN**  
**SIGN PLAN REVIEW APPLICATION**

**Murfreesboro City Code - Planned Sign Overlay (PSO)**

City of Murfreesboro  
Building & Codes Department  
P.O. Box 1139, 111 W. Vine Street  
Murfreesboro, TN 37133-1139  
Web site: [murfreesborotn.gov](http://murfreesborotn.gov)

Telephone: (615) 893-3750  
Voice/TDD: (615) 849-2689  
Email: [akerr@murfreesborotn.gov](mailto:akerr@murfreesborotn.gov)  
[bhardison@murfreesborotn.gov](mailto:bhardison@murfreesborotn.gov)

**Plan Review Application Can Not Be Accepted without Required Information, Plans, Renderings (see page 3), and Written Stamped Approval from the Landlord**

**A copy of the sign ordinance can be downloaded from the City of Murfreesboro web-site: [murfreesborotn.gov](http://murfreesborotn.gov).**

**Applications may be transmitted electronically, by mail or personal delivery to:**  
**Amelia Kerr [akerr@murfreesborotn.gov](mailto:akerr@murfreesborotn.gov) FAXED APPLICATIONS WILL NOT BE ACCEPTED.**

Business Name \_\_\_\_\_ Business Address and Unit # \_\_\_\_\_  
Applicant Name: \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_  
St. \_\_\_\_\_ Zip \_\_\_\_\_ Phone # \_\_\_\_\_ email: \_\_\_\_\_  
Sign Contractor: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_  
St: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone # \_\_\_\_\_ email: \_\_\_\_\_

**CLASS OF WORK:** \_\_\_\_\_ New \_\_\_\_\_ Alteration \_\_\_\_\_ Relocation \_\_\_\_\_ Demolition \_\_\_\_\_ Reconstruct

**TYPE OF SIGN:**  
(Based on Stones River Mall Signage & Graphics Specifications Sept. 6, 2006)

**Site and Mall Signage**

_____ Main Pylon Signs	_____ Mall Directory Sign
_____ Monument Wall Sign	_____ Mall Entry
_____ Vehicle Directional Sign	_____ Food Court Entry

**Anchor & Retail Tenant Signage**

**Anchor Tenant Sign:**

\_\_\_\_\_ Tenant Fascia Sign                      \_\_\_\_\_ Tenant Entry Sign

**Retail Tenant Sign:**

\_\_\_\_\_ Fascia Mounted Retail Sign                      \_\_\_\_\_ Retail Tenant Blade Sign  
\_\_\_\_\_ Optional Sign *(Permitted at Landlord & City's discretion. These signs count toward Tenant's total allowable sign area)*  
\_\_\_\_\_ Canopy Sign                      \_\_\_\_\_ Wall Mounted Plaques                      \_\_\_\_\_ Window Graphics  
\_\_\_\_\_ Inlaid or Projected Floor/Sidewalk Signs

NOTE: Electronic Message Center signs as defined by the Murfreesboro Sign Ordinance are Prohibited. See prohibited signs, Murfreesboro City Code Sec. 25 1/4-24. Signs not expressly allowed are not permitted.

Printed Applicant Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

**STONES RIVER MALL (PSO) ON-SITE PERMANENT SIGN APPLICATION (continued):**

**Project Address:** \_\_\_\_\_

**ILLUMINATION \*\* A separate electrical permit for final connection to a sign is required to be obtained prior to permit issuance.**

Electrical Permit required: \_\_\_\_\_ YES \_\_\_\_\_ NO

\_\_\_\_\_ External (Indirect) \_\_\_\_\_ Non- illuminated

\_\_\_\_\_ Push Thru Style (Internal illumination of a sign such that only the letters or graphics are illuminated. This includes cabinet sign, channel letters and reverse channel letters)

**VALUATION:** \$ \_\_\_\_\_ **State General Contractors License #** \_\_\_\_\_

*(Valuation is defined as the total cost of all signage together with construction and installation, including all materials, labor, site preparation, design fees, overhead and profit)*

**Detailed Description of sign(s) proposed (Include dimensions and square footage of each of sign panel, height, detailed lighting information, etc. Please do not say "See attached"):** \_\_\_\_\_

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Project Address: \_\_\_\_\_

**PLAN REQUIREMENT CHECKLIST**

**Plan Review Application Will Not be Processed without the Following Information; check to show compliance.**

**NOTE: Generic plans will not be accepted. Colored original illustrations of the actual signs (s) to be installed must be provided.**

**Attached Signs**

**Dimensioned building elevation indicating:**

- \_\_\_\_\_ Position of the proposed sign in relation to the building
- \_\_\_\_\_ Linear feet of the building frontage (Single Occupants)  
Tenant frontage (Multi-tenant Complexes)
- \_\_\_\_\_ Height of the proposed sign on the building
- \_\_\_\_\_ All existing attached signage (Single Occupants) or occupant signage (Multi-tenant Complexes)

**Dimensioned proposed sign plan indicating:**

- \_\_\_\_\_ Display surface area of the sign (Height x Length in a tight envelope)
- \_\_\_\_\_ Sign material specifications
- \_\_\_\_\_ Sign Lighting specifications

**Dimensioned sign site plan indicating:**

- \_\_\_\_\_ Site Specific Location of the proposed sign
- \_\_\_\_\_ Building setbacks from the rights-of-way

**Ground or Freestanding wall signs:**

**TN ONE CALL CONFIRMATION#:** \_\_\_\_\_ (#811- Call before you dig)

Date utilities will be located \_\_\_\_\_

**Dimensioned and scaled sign plan indicating:**

- \_\_\_\_\_ Height of sign
- \_\_\_\_\_ Display surface area of the sign (Height x Length in a tight envelope)
- \_\_\_\_\_ Foundation and structural framing members of the proposed sign
- \_\_\_\_\_ Sign material specifications
- \_\_\_\_\_ Sign Lighting specifications

**Dimensioned and scaled utilities site plan indicating:**

- \_\_\_\_\_ Linear measurement of Street frontage
- \_\_\_\_\_ Site specific location of the proposed sign
- \_\_\_\_\_ Building Setbacks from the rights-of-way
- \_\_\_\_\_ Utilities, Easements and power lines
- \_\_\_\_\_ Spacing from all existing ground signs to remain on lot
- \_\_\_\_\_ If no site plan is available Certification of Sign Placement by Registered TN Engineer or Surveyor with site exhibit showing ROW, location of sign, utilities and easements.

**Field markings by applicant at time of application:**

- \_\_\_\_\_ Leading edge of sign location marked by stake and white paint line
- \_\_\_\_\_ Utilities marked by Tennessee One-Call (811)
- \_\_\_\_\_ If required a Certification of Sign Placement by Registered TN Engineer or Surveyor

**\*\*\*\* A location inspection will be performed at the time of application**

**\*\*\*\*It is the responsibility of the applicant to request a footing inspection and a final inspection.**

Printed Applicant Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**City of Murfreesboro  
Building and Codes Department**

111 West Vine Street, Murfreesboro, TN 37133

Phone: 615-893-3750

Fax: 615-217-3016

**FINAL INSPECTION DEPOSIT AGREEMENT**



Project Name: \_\_\_\_\_

**THIS AGREEMENT MUST BE SIGNED PRIOR TO THE ISSUANCE OF A SIGN PERMIT**

By signing this Agreement and by making the required deposit, the Applicant (and Depositor, if different) agrees that the project will be completed and a final inspection will be requested in accord with the terms and conditions of the Sign permit, as amended or extended. In the event that the terms and conditions contained in the Sign Permit are not completed/corrected/fulfilled within the time specified, the deposit will be forfeited. In addition, unless the Applicant can prove good cause to the Director, Building and Codes department, the Applicant will not be eligible for any other sign permits until the project as passed final inspection. Forfeiture of the deposit does not constitute authority to violate or to continue to violate or to set aside any provisions of the codes or ordinances of the City, and the City shall be entitled to enforce such codes or ordinances by any available means.

***It is the responsibility of those signing this Agreement to request all inspections when work is complete and all requirements have been satisfied.***

Application Date: \_\_\_\_\_ Permit Number: \_\_\_\_\_ Required Completion Date: \_\_\_\_\_

**Project Address:** \_\_\_\_\_

**Owner of Business:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Designated Contact Person: \_\_\_\_\_

**Permit Applicant:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF APPLICANT PRINTED NAME DATE

\_\_\_\_\_  
SIGNATURE OF DEPOSITOR, IF DIFFERENT PRINTED NAME DATE

**FOR OFFICE USE ONLY:**

REFUNDABLE DEPOSIT: \$75.00 \_\_\_\_\_

INVOICE NUMBER: \_\_\_\_\_

ISSUE DATE: \_\_\_\_\_

COMPLETION APPROVAL DATE: \_\_\_\_\_

**STONES RIVER MALL (PSO) ON-SITE PERMANENT SIGN APPLICATION (continued):**

**Project Address:** \_\_\_\_\_

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any state or local ordinance regulating construction or the performance of construction.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE SIGNED

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
TITLE

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**FOR OFFICE USE ONLY**

*Staff Comments/Conditions:* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Zone District: \_\_\_\_\_

Approved: \_\_\_\_\_

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

Disapproved: \_\_\_\_\_

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

Explanation:

**Incomplete/Not Accepted:** \_\_\_\_\_

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

Items needed: