

THE AVENUE - MURFREESBORO
ON-SITE PERMANENT SIGN(S)
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

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

Sign Plan Application Can Not Be Accepted without Required Information, Plans and Renderings (see page 3) and Written Stamped approval from the Landlord.

A copy of the City sign ordinance can be downloaded from the City of Murfreesboro web-site: murfreesborotn.gov.

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

Business Name _____ Business Address _____

Tenant Unit #: _____ Square Foot Tenant Space: _____

Applicant Name _____ Address _____ City _____

St. _____ Zip _____ Phone # _____ email: _____

Sign Contractor Name: _____ Address _____ City _____

St _____ Zip _____ Phone #: _____ email: _____

CLASS OF WORK: _____ New _____ Alteration _____ Relocation _____ Demolition _____ Reconstruct

TYPE OF SIGN:

(Based on The Avenue – Murfreesboro Signage & Graphics Criteria Dec. 6, 2011 Revision 4)

Tenant Signage (page 3-10)

- _____ Vertical Wall Sign
- _____ Building Wall Sign
- _____ Blade Sign
- _____ Loft signage

Outparcel Signage (page 38)

Single Tenant

- _____ Building Wall Sign
- _____ Freestanding Monument
- _____ Window Sign
- _____ Canopy or Awning Sign
- _____ Logo

Site Signage (page 16-37)

- _____ Tenant Directory
- _____ Internally Illum. Tenant Directory/Ad Panel
- _____ 2-sided Directory Ad Panel
- _____ Sidewalk Signage
- _____ Entry Wall Signage
- _____ Interstate Monument Sign
- _____ Interstate Monument Ad Panel

Multi-Tenant

- _____ Building Wall Sign
- _____ Freestanding Monument
- _____ Window Sign
- _____ Canopy or Awning Sign

NOTE: Electronic Message Center signs as defined by the Murfreesboro Sign Ordinance are Prohibited.
See prohibited signs, Murfreesboro City Code Sec. 25 ¼-24. Signs not expressly allowed are not permitted.

Printed Applicant Name: _____

Signature: _____

Date: _____

Project Address: _____

PLAN REQUIREMENT CHECKLIST

PROJECT NAME: _____

**Application Will Not be Processed without the Following Information; check to show compliance.
Plans must be stamped with Landlord approval and submitted with application.**

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) to remain on building

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#: _____ (Call #811 before you dig)

Date Utilities will be marked _____

Dimensioned and scaled sign plan indicating

- _____ Height
- _____ 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 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, a Certification of Sign Placement 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 Certification of Sign Placement by Registered TN Engineer or Surveyor

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

****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:

Permit Applicant:

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Designated Contact Person: _____

Phone: _____

SIGNATURE OF APPLICANT

PRINTED NAME

DATE

SIGNATURE OF DEPOSITOR, IF DIFFERENT

PRINTED NAME

DATE

FOR OFFICE USE ONLY:

REFUNDABLE DEPOSIT: \$75.00 _____

ISSUE DATE: _____

INVOICE NUMBER: _____

COMPLETION APPROVAL DATE: _____

THE AVENUE (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

FOR OFFICE USE ONLY

Staff Comments/Conditions: _____

Zone District: _____

Approved: _____

Date: _____

Disapproved: _____

Date: _____

Reason:

Incomplete/Not Accepted: _____

Date: _____