

# CITY OF NORRIS SIGN PERMIT:

Permit No. (2024-XX) \_\_\_\_\_

## ELECTRICAL: PERMITS AND INSPECTIONS THROUGH CLINTON UTILITIES BOARD

1. Job Address: \_\_\_\_\_
2. Owner, mailing address and contact no.: \_\_\_\_\_ Phone #: \_\_\_\_\_
3. Contractor, mailing address, contact no., license no. and expiration date: \_\_\_\_\_
4. Type of Sign: Residential \_\_\_\_\_ Commercial: \_\_\_\_\_
5. Class of Work: New \_\_\_\_\_ Addition \_\_\_\_\_ Alteration \_\_\_\_\_ Repair \_\_\_\_\_ Move \_\_\_\_\_ Remove \_\_\_\_\_
6. Property Zoning: Far \_\_\_\_\_ R1 \_\_\_\_\_ R2 \_\_\_\_\_ R3 \_\_\_\_\_ C1 \_\_\_\_\_ C2 \_\_\_\_\_ I1 \_\_\_\_\_ P1 \_\_\_\_\_ S1 \_\_\_\_\_ S2 \_\_\_\_\_ W1 \_\_\_\_\_ Flood \_\_\_\_\_
7. List proposed sign setback to right of way: \_\_\_\_\_
8. Any Easements on Property (List): \_\_\_\_\_
9. Valuation of Work: \$ \_\_\_\_\_

**Please describe the sign listing all relevant factors including area, height, lighting (if any), pole or ground, content/design, etc. Attach any drawings or plans of the proposed sign to this application.**

**Sign Description:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This permit becomes null and void if work or construction authorized is not commenced within 180 days or if work is suspended or abandoned for a period of 180 days at any time after work is commenced. 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 other state or local law regulating construction or the performance of construction.

Signature of property owner / or

Date

Signature of authorized agent

Affidavit of Exemption for workers' compensation insurance per T.C.A. 13-7-211

- I am not required to obtain coverage under the TN Workers' Compensation Law, T.C.A. 50-6-104 through 106; or
- I am performing work on my own property in my own city of residence; or
- I am directly supervising work on my own property in my city of residence.

FOR OFFICE USE

Comments:

Application accepted by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved for issuance by: \_\_\_\_\_ Date: \_\_\_\_\_

Total due:

Permit Validation by: \_\_\_\_\_ Receipt no. \_\_\_\_\_ Date: \_\_\_\_\_