

**OFF-SITE PERMANENT GROUND SIGN  
Murfreesboro City Code 25 ¼ - 27  
APPLICATION FOR PLAN REVIEW**

City of Murfreesboro  
Building & Codes Department  
P.O. Box 1139, 111 W. Vine Street  
Murfreesboro, TN 37133-1139

Telephone: (615) 893-3750  
Voice/TDD: (615) 849-2689  
Web site: murfreesborotn.gov

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

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

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

**Sign Plan Review Application Can Not Be Accepted Without a Complete Application with Required Information, Renderings and plans (see page 3).**

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

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

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

**Applicant:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Sign Contractor:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Property Owner:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State#** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Email:** \_\_\_\_\_

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

**In order to qualify for a new Off-Site Sign ALL of the following conditions must exist; check to show compliance.**

\_\_\_\_\_ Sign shall:

- \_\_\_\_\_ not exceed 775 sq. ft. in area;
- \_\_\_\_\_ be setback a minimum of 5' from Rights-of-Way and 10' from power lines;
- \_\_\_\_\_ not exceed 50' in height;
- \_\_\_\_\_ be located within a CH, HI, or LI District;
- \_\_\_\_\_ be located within 200' of Interstate-24 right of way;
- \_\_\_\_\_ not be located within 1000' of any other off-site permanent sign in both directions on the same side of the interstate or street;
- \_\_\_\_\_ not be located within 1000' of an interchange or intersection at grade measured along the interstate from the nearest point of the beginning or ending of pavement widening at the exit or entrance to the main-traveled way.

**OFF-SITE SIGN APPLICATION (continued):**

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

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

**The Illuminated Signs which are included in this application for permit are listed in accordance with the National Electric Code. The listing Number(s) are:** \_\_\_\_\_

**VALUATION: \$** \_\_\_\_\_ **General Contractors State 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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**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 prohibited.

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

**OFF-SITE SIGN APPLICATION (continued):**

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

**PLAN REQUIREMENT CHECKLIST**

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

**Date utilities will be marked** \_\_\_\_\_

**Plan Review Application Will Not be Processed without the Following Information;**

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

**State Permit number** \_\_\_\_\_ **Copy of State Permit** \_\_\_\_\_

**Scaled and Dimensional sign plan prepared and sealed by a registered TN engineer, Indicating:**

- \_\_\_\_\_ Height of sign
- \_\_\_\_\_ Display surface area of the sign (Height x Length in a tight envelope)
- \_\_\_\_\_ Foundation and structured framing members including structural specifications
- \_\_\_\_\_ Sign materials specifications
- \_\_\_\_\_ Wind load design
- \_\_\_\_\_ Sign Lighting specifications

**Scaled and Dimensional site plan prepared and sealed by a registered TN engineer, indicating:**

- \_\_\_\_\_ Location of proposed sign on the site
- \_\_\_\_\_ Setbacks from the rights-of-way
- \_\_\_\_\_ Easements
- \_\_\_\_\_ Spacing from all existing ground signs to remain on the lot.

**Certification of Sign Placement Form completed by sealed by a registered TN engineer or surveyor indicating the sign:**

- \_\_\_\_\_ is Five (5) feet minimum of the street or interstate Right of Way.
- \_\_\_\_\_ is Ten (10) feet measured horizontally from power lines.
- \_\_\_\_\_ the sign is not located in or over any existing or proposed Public Utility or Drainage Easement. If located within an easement describe easement in space provided below.
- \_\_\_\_\_ is located within 200' of Interstate-24 right of way;
- \_\_\_\_\_ is not located within 1000' of any other off-site permanent sign in both directions on the same side of the interstate or street;
- \_\_\_\_\_ is not located within 1000' of an interchange or intersection at grade measured along the interstate from the nearest point of the beginning or ending of pavement widening at the exit or entrance to the main-traveled way.

**Field markings by applicant**

- \_\_\_\_\_ Leading edge of sign location marked by stake and white paint line
- \_\_\_\_\_ Utilities marked by Tennessee One-Call (811)
- \_\_\_\_\_ 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.**

**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 accordance 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 has 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 \_\_\_\_\_

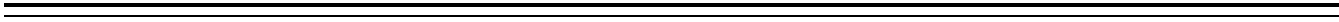
ISSUE DATE: \_\_\_\_\_

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

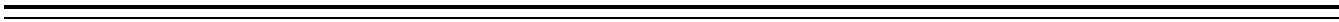
COMPLETION APPROVAL DATE: \_\_\_\_\_

**OFF-SITE SIGN APPLICATION (continued):**

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



<p>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.</p>	
_____ SIGNATURE OF APPLICANT	_____ DATE SIGNED
_____ PRINTED NAME	_____ TITLE
_____ OWNERS SIGNATURE	_____ DATE SIGNED



**FOR OFFICE USE ONLY**

*Staff Comments/Conditions:* \_\_\_\_\_  
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Zone District: \_\_\_\_\_ Total Square Footage: \_\_\_\_\_ Overall Height: \_\_\_\_\_

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

Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_  
Reason: \_\_\_\_\_

**Incomplete/Not Accepted:** \_\_\_\_\_ Date: \_\_\_\_\_  
Items Needed: \_\_\_\_\_