

**CITY OF LEXINGTON**  
**BUILDING DEPARTMENT**

CITY OF LEXINGTON PO Box 70, Lexington, NE 68850 Phone: 308-324-2341 Ext. Fax: 308-324-4590

**APPLICATION FOR SIGN PERMIT**

2002

Name:		Mailing Address:		Unit #:	
City:			State:	Zip:	
Phone:	Fax:	Cell:	E-Mail:		

**CONTRACTOR**

Name:		Mailing Address:		Unit #:	
City:			State:	Zip:	
Phone:	Cell Phone:	City License No.:			

**JOB SITE INFORMATION**

Job Address:		Bldg/Unit No.:	
Lot#:	Block:	Subdivision:	
Zoning:		Flood Zone:	
Total Square Footage of NEW Sign(s):		Height of NEW Sign(s):	

Description & Location of all existing signs on site:  
 \_\_\_\_\_  
 \_\_\_\_\_

**SIGN INFORMATION**

Class of Sign		Items Required for Submittal
<input type="checkbox"/> Animated <input type="checkbox"/> Arcade <input type="checkbox"/> Billboard <input type="checkbox"/> Bulletin Board <input type="checkbox"/> Flashing <input type="checkbox"/> Out Door Ad. Device <input type="checkbox"/> Free Standing <input type="checkbox"/> Public <input type="checkbox"/> Illuminated <input type="checkbox"/> Non-Conforming <input type="checkbox"/> Painted	<input type="checkbox"/> Portable <input type="checkbox"/> Projecting <input type="checkbox"/> Revolving <input type="checkbox"/> Roof <input type="checkbox"/> Wall <input type="checkbox"/> Semi Public/Private Info <input type="checkbox"/> Off Premise <input type="checkbox"/> On Premise <input type="checkbox"/> Public Information <input type="checkbox"/> Political <input type="checkbox"/> Temporary	<input type="checkbox"/> Site Plan <input type="checkbox"/> Legal Description <input type="checkbox"/> Physical Address <input type="checkbox"/> New Sign Plans
		<b>Type of Work</b>
		<input type="radio"/> Erect <input type="radio"/> Alter <input type="radio"/> Move <input type="radio"/> Repair
		<b>Diggers Hotline</b> <b>1-800-331-5666</b>

I hereby certify I have read and examined this application and corresponding documents.  
 All provisions of laws and ordinances governing this work will be complied with, whether specified or not.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY**

Date Rec'd:	Issued By:	Est. Cost:	Fee Due:	<input type="checkbox"/> Paid
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**NOTICE: This permit expires within 180 days after issuance if no construction activity has taken place.**