



**ST. JOHN**  
PLANNING & ZONING

**SIGN PERMIT APPLICATION**

TO SUBMIT APPLICATION ONLINE VISIT [WWW.MYGOVERNMENTONLINE.ORG](http://WWW.MYGOVERNMENTONLINE.ORG)

**OFFICE USE ONLY**

Permit No: _____	Date Requested: _____
Parcel #: _____	Zoning District: _____
Council District / At Large: _____	Flood Zone: _____
Certificate of Appropriateness Rec'd: Y / N	Historic District: Y / N      Design Rev. Corridor: Y / N

**APPLICATION FOR:**       DETACHED SIGN       ATTACHED SIGN       BILLBOARD

**APPLICANT INFORMATION**

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

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

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

**PROPERTY OWNER INFORMATION** (ALL owners must be listed and must sign)

Same as above? (circle one) **YES / NO**      If **NO**, has the authority of the applicant to act on behalf of the property owner been verified with a signed, dated, and notarized endorsement? Complete page 3.

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

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

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

**TENANT INFORMATION** (if applicable)

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

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

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

**CONTRACTOR INFORMATION**

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

Mailing Address: \_\_\_\_\_      License #: \_\_\_\_\_

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

\_\_\_\_\_  
Applicant's Signature      Date



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**SIGN INFORMATION**

- 1. Sign location address: \_\_\_\_\_
- 2. Sign value: \$ \_\_\_\_\_
- 3. Total square footage of sign: \_\_\_\_\_
- 4. Linear footage of building: \_\_\_\_\_
- 5. Linear footage of lot: \_\_\_\_\_

Please describe the project in detail: \_\_\_\_\_

**SUBMITTAL REQUIREMENTS**

- Completed and signed application.
- Recorded copy of Act of Sale, Judgment of Possession, or Deed to the property.
- Sign plans. Please contact South Central Planning for any plan review questions at 985-655-1070. Plans will also be reviewed by the Planning & Zoning Department for compliance with the Code.
- Copy of Contractor’s License.
- Completed and signed Owner’s Endorsement.
- Payment of fees; payable by credit card, check or money order to: “St. John Parish Council”.

**FEES**

- 1. Attached Sign \$ 100.00
- 2. Detached Sign / Billboard / Monument \$ 300.00
- 3. Planning & Zoning Inspection Fee \$ 50.00
- 4. Technology Fee \$ 10.00

*NOTE: St. John the Baptist Parish has not examined nor reviewed the title of any portion of land in this application, or any restrictive covenants or restrictions placed on said property. Any action of the Parish in this matter does not: (1) imply that the applicant’s title or ownership is valid, (2) that there are or are not any restrictive covenants or other restrictions on said property, or (3) that any restrictive covenants or restrictions that may be on said property are enforceable or are not enforceable.*

*NOTE: Within sixty (60) days of submission of minimum application requirements, this application will become null and void. By signature of this application, the applicant agrees and understand that all permit fees are non-refundable.*

*NOTE: All fees will be doubled for all after-the-fact permits and when information provided on an application is falsified. All fees are non-refundable.*

\_\_\_\_\_  
Applicant’s Signature

\_\_\_\_\_  
Date



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**OWNER'S ENDORSEMENT**

(please print clearly)

I \_\_\_\_\_ being duly sworn, depose that I reside at  
Owner(s) / Corporation  
\_\_\_\_\_, \_\_\_\_\_ in the Parish  
Street City  
of \_\_\_\_\_ and State of \_\_\_\_\_ and that I am  
Parish State  
the owner of the property described as \_\_\_\_\_ and that I have authorized  
Address  
\_\_\_\_\_ to make the foregoing petition for a Sign Permit.  
Applicant

\_\_\_\_\_  
Signature of owner(s) of property or authorized agent

SWORN TO ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC

Print name of Notary: \_\_\_\_\_

Bar roll #: \_\_\_\_\_