



# CITY OF RUSTON

Sign # \_\_\_\_\_

\$25 Annual Inspection Fee

Inspection Department  
318-251-8640  
Fax: 318-251-8650

## OFF-PREMISE SIGN REGISTRATION

(Ord. 1466, Sec. 22-77)

ORIGINAL PERMIT NUMBER \_\_\_\_\_ DATE OF ORIGINAL PERMIT \_\_\_\_\_

SIGN ADDRESS \_\_\_\_\_

GPS COORDINATES OF SIGN: \_\_\_\_\_  
State Plane NAD 1983 (Louisiana North FIPS 1701 Feet)

### SIGN OWNER (Primary Contact for the Project):

Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

LICENSE NUMBER: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_ PHONE: \_\_\_\_\_

PROPERTY OWNER ADDRESS: \_\_\_\_\_

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**SUPPORTING INFORMATION:**

CURRENT ZONING \_\_\_\_\_

PRESENT USE OF PROPERTY \_\_\_\_\_

DISTANCE FROM THE ROAD RIGHT-OF-WAY TO THE NEAREST EDGE OF THE SIGN: \_\_\_\_\_

SIGN UNIT HEIGHT AND DIMENSIONS (ELEVATION VIEW): \_\_\_\_\_

NUMBER OF FACES: \_\_\_\_\_

MEANS OF ILLUMINATION: \_\_\_\_\_

ELECTRICAL SIGNAGE UL LISTED AND STAMPED?: \_\_\_\_\_

*The applicant has prepared this application and certifies that the facts stated herein and exhibits attached hereto are true and correct.*

\_\_\_\_\_  
Signature of Owner, Agent or Applicant

\_\_\_\_\_  
Date

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*Official Use Only*

\_\_\_\_\_  
Plans Examiner

\_\_\_\_\_  
Zoning Official

COMMENTS YES or NO
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**COMMENTS:**