



City of Senatobia

MISSISSIPPI

131 N. Front St. Senatobia, MS 38668
P.O. Box 1020 Phone: 662-562-4474
permitrequest@cityofsenatobiams.go

SIGNAGE PERMIT APPLICATION

Project Address _____ Zone _____

Business Owner/Occupant _____ Phone _____

Mailing Address _____

Business Owner/Occupant Email Address: _____

Use Under Permit To Be: _____

Size of sign _____

Description of work: _____

I hereby agree to comply with all City, State, and Federal Laws & Regulations and the current codes adopted by the City of Senatobia. By signing below, you further attest and Certify before issuance of permit that your signage meets all required regulations.

Applicants Signature _____ Date _____

OFFICE USE ONLY

Permit Fee _____ Review Fee _____ Cash _____ CC _____ Check # _____ Receipt # _____

Intake Staff: _____ Date _____

Approval Signature _____ Title _____

Date _____ Permit # _____