



MIKE COOPER
Mayor

CITY OF COVINGTON

PLANNING AND ZONING OFFICE

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APPLICATION FOR SIGN PERMIT (PERMANENT)

BUSINESS:

Name of Business

Business Address

City State Zip

Phone

Cost of Sign

SIGN CONTRACTOR:

Sign Contractor's Name

Contractor Address

City State Zip

Phone

License Number

TYPE OF SIGN: Fascia Free Standing Illuminated Yes No

Lumens _____ Square Footage _____ Height _____

Describe supports for the sign: _____

Attach the following with this application:

1. Survey/Site Plan showing proposed location of sign
2. Drawing of sign showing measurements
3. The location of all existing signs must be shown on the the Survey/Site Plan

I hereby certify that there are no other fascias or freestanding signs at this business location.

Applicant's Signature _____ **Date** ____ / ____ / ____

For office use only

Approved

Denied

Comments _____

Reviewed by _____ **Date** ____ / ____ / ____

