

**THE AVENUE - MURFREESBORO**

**Murfreesboro City Code - Planned Sign Overlay (PSO)  
ON-SITE PERMANENT SIGN(s)  
APPLICATION FOR PLAN REVIEW**

Printed Applicant Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

City of Murfreesboro  
Building & Codes Department  
P.O. Box 1139, 111 W. Vine Street  
Murfreesboro, TN 37133-1139  
Web site: murfreesborotn.gov

Telephone: (615) 893-3750  
Voice/TDD: (615) 849-2689  
Email: [akerr@murfreesborotn.gov](mailto:akerr@murfreesborotn.gov)  
[bhardison@murfreesborotn.gov](mailto:bhardison@murfreesborotn.gov)  
[slilly@murfreesborotn.gov](mailto:slilly@murfreesborotn.gov)

**Plan Review Application Can Not Be Accepted Without Required Plans and Approval from the Landlord- See Page 3.**

A copy of the sign ordinance can be downloaded from the City of Murfreesboro web-site: [murfreesborotn.gov](http://murfreesborotn.gov).  
Applications may be transmitted electronically, by mail or personal delivery to:  
Sheila Lilly- [slilly@murfreesborotn.gov](mailto:slilly@murfreesborotn.gov)

**DO NOT SUBMIT APPLICATIONS DIRECTLY TO THE SIGN INSPECTORS**

Business Address and Unit # \_\_\_\_\_ Business Name: \_\_\_\_\_  
Applicant Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ email: \_\_\_\_\_  
Sign Contractor Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Contractor Lic. #: \_\_\_\_\_

**CLASS OF WORK:** \_\_\_\_ New \_\_\_\_ Alteration \_\_\_\_ Relocation \_\_\_\_ Demolition \_\_\_\_ Reconstruct  
**VALUATION:** \$ \_\_\_\_\_ **TN ONE CALL CONFIRMATION#:** \_\_\_\_\_  
*(Valuation is defined as the total cost of all signage together with construction and installation, including all materials, labor, site preparation, design fees, overhead and profit)*

**TYPE OF SIGN:**

(Based on The Avenue – Murfreesboro Signage & Graphics Criteria Book Feb. 7, 2007)

**Tenant Signage** (page 3-11)

\_\_\_\_\_ Wall Sign (Store Front)  
\_\_\_\_\_ Blade Sign

**Site Signage** (page 20-32)

\_\_\_\_\_ Tenant Directory  
\_\_\_\_\_ Internally Illum. Tenant Directory/Ad Panel  
\_\_\_\_\_ 2-sided Directory Ad Panel  
\_\_\_\_\_ Sidewalk Signage  
\_\_\_\_\_ Entry Wall Signage  
\_\_\_\_\_ Interstate Monument Sign  
\_\_\_\_\_ Interstate Monument Ad Panel  
\_\_\_\_\_ Tree & Garden Flexible Linear Lighting

**Outparcel Signage** (page 35)

\_\_\_\_\_ Single Tenant  
\_\_\_\_\_ Wall-Mounted  
\_\_\_\_\_ Ground Mounted  
(Freestanding Monument)  
\_\_\_\_\_ Window Sign  
\_\_\_\_\_ Canopy or Awning Sign  
  
\_\_\_\_\_ Multi-Tenant  
\_\_\_\_\_ Wall-Mounted  
\_\_\_\_\_ Ground  
(Freestanding Monument)  
\_\_\_\_\_ Window Sign  
\_\_\_\_\_ Canopy or Awning Sign

See prohibited signs, Murfreesboro City Code Sec. 25 ¼-24. Signs not expressly allowed are not permitted.



Project Address: \_\_\_\_\_

Printed Applicant Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### PLAN REQUIREMENT CHECKLIST

PROJECT NAME: \_\_\_\_\_

Plan Review Application Will Not be Processed without the Following Information; check to show compliance.

Plans must be stamped with Landlord approval.

• **Attached Signs**

- \_\_\_\_\_ (1) *Dimensioned building elevation* indicating
  - \_\_\_\_\_ Position of the proposed sign in relation to the building
  - \_\_\_\_\_ Linear feet of the building frontage (Single Occupants)
  - \_\_\_\_\_ Tenant frontage (Multi-tenant Complexes)
  - \_\_\_\_\_ Height of the proposed sign on the building
  - \_\_\_\_\_ All existing attached signage (Single Occupants) or occupant signage (Multi-tenant Complexes)
- \_\_\_\_\_ (2) *Dimensioned proposed sign plan* indicating
  - \_\_\_\_\_ Height
  - \_\_\_\_\_ Shape
  - \_\_\_\_\_ Display surface area of the sign
  - \_\_\_\_\_ Facing material specifications
  - \_\_\_\_\_ Lighting specifications
- \_\_\_\_\_ (3) *Dimensioned sign site plan* indicating:
  - \_\_\_\_\_ Site Specific Location of the proposed sign
  - \_\_\_\_\_ Building setbacks from the rights-of-way

• **Ground or Freestanding wall signs:**

- \_\_\_\_\_ (1) *Dimensioned and scaled sign plan* indicating
  - \_\_\_\_\_ Height
  - \_\_\_\_\_ Shape
  - \_\_\_\_\_ Display surface area of the sign
  - \_\_\_\_\_ Foundation and structural framing members of the proposed sign
  - \_\_\_\_\_ Facing material specifications
  - \_\_\_\_\_ Lighting specifications
- \_\_\_\_\_ (2) *Dimensioned and scaled site plan* indicating
  - \_\_\_\_\_ Street frontage
  - \_\_\_\_\_ Site specific location of the proposed sign
  - \_\_\_\_\_ Setbacks from the rights-of-way
  - \_\_\_\_\_ Easements and power lines
  - \_\_\_\_\_ Spacing from all existing ground signs
  - \_\_\_\_\_ Property pin locations
- \_\_\_\_\_ (3) *Field markings by applicant at time of application*
  - \_\_\_\_\_ Leading edge of sign location marked by stake and white paint line
  - \_\_\_\_\_ Utilities marked by Tennessee One-Call (811)
  - \_\_\_\_\_ Property pin locations or Certification of Sign Placement by Registered TN Engineer or Surveyor

Plans required for sign alterations will be based on the type of alteration.

*NOTE: Generic plans will not be accepted. Colored original illustrations of the actual signs (s) to be installed must be provided. Faxed submittals will not be accepted.*

**It is the responsibility of the applicant to request a location inspection prior to permit issuance, a footing inspection and a final inspection.**

**THE AVENUE (PSO) ON-SITE PERMANENT SIGN APPLICATION (continued)**

**Project Address:** \_\_\_\_\_

<p>I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any state or local ordinance regulating construction or the performance of construction.</p>	
_____ SIGNATURE OF APPLICANT	_____ DATE SIGNED
_____ PRINTED NAME	_____ TITLE

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**FOR OFFICE USE ONLY**

*Staff Comments/Conditions:* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Zone District: \_\_\_\_\_

Approved: \_\_\_\_\_

Date: \_\_\_\_\_

Disapproved: \_\_\_\_\_

Date: \_\_\_\_\_

**Incomplete/Not Accepted:** \_\_\_\_\_

Date: \_\_\_\_\_