

CITY OF HEBRON ESTATES

PO Box 416 Shepherdsville, KY 40165 / 3407 Burkland Blvd Shepherdsville, KY 40165
Hebronstates84@gmail.com Phone & Fax: (502) 957-3106

SIGN CERTIFICATE APPLICATION / PERMIT / RENEWAL

_____ Applicant		_____ Company or Organization's name on the sign	
_____ Mailing address		_____ Mailing Address	
_____ Physical address if different from mailing address		_____ Physical Address if different from mailing address	
_____ Telephone Number	_____ Fax Number	_____ Telephone Number	_____ Fax Number

Please submit the following information to obtain your sign(s) permit(s) for the City of Hebron Estates.

Please remit **\$35.00 per sign** make payable to:

City of Hebron Estates - PO Box 416 Hillview, KY 40129 or 3407 Burkland Blvd
Shepherdsville, KY 40165

Should you have questions concerning your permits(s) please see our web site at
www.cityofhebronstates.com under Ordinance 2017-06 or call the number above.

If you currently do not have a sign permit with the City, please fill out information below and send to address above with payment for each sign(s).

PLEASE BRING PICTURES OF THE SIGN AND A PICTURE OF WHERE IS IT GOING ON THE BUILDING .

Size of Sign _____ Size in sq. ft. _____ Is the sign one sided or double sided? _____
Height from grade to bottom of sign _____ Height from grade to the top of the sign _____
Will this be for a tenant space in a strip mall _____ If so, what is the lineal foot of principal frontage _____
If this is for an individual lot, list lineal footage of lot frontage _____
Give exact physical address of the property where the sign is going to be placed.

Will this be a free standing sign _____yes _____no

Is the sign in the same location as the business that is being advertised? ___ yes ___ no

If No, please attach a letter of permission from the property owner.

Signature of Applicant

Date

Office Use Only	
Date Received _____	
Date Issued _____	
Fee _____	
Issued by _____	
Permit Number _____	
Date refused _____	
Reason _____	