JACKSON COUNTY, MISSOURI
APPLICATION FOR OFF-PREMISE SIGN

APPLICANT INFORMATION:
1. Application must be filed with the Jackson County Development Division, 303 W. Walnut, Independence, Missouri 64050.

2. Refer to the Off-Premise Sign Standards, Section 24007.2 of the Jackson County Unified Development Code (Enclosed). When an Off-Premise Sign does not comply with these standards, applicant has the right to petition the Board of Zoning Adjustment for a Variance, Section 24003.23.

3. A scaled map of the property, correlating with the legal description, and clearly showing the off-premise sign location must accompany the application. Also include a scaled drawing of the sign showing size and construction materials.

4. Application must be typed or printed in a legible manner. Provide all information requested. Incomplete applications will be returned to applicant.

5. The filing fee of $100.00 ≤ 100 sq. ft., $500 > 100 sq. ft. (non-refundable) must accompany application. (Check payable to Manager of Finance)

TO BE COMPLETED BY OFFICE PERSONNEL ONLY:
APPLICATION NUMBER ASSIGNED: ____________________________________________

DATE FILED ___________________ PRIMARY ROADWAY _________________________

CONFORMS TO OFF PREMISE SIGN STANDARDS: YES _____________ NO ___________

IF NO, LIST STANDARD EXCEPTIONS:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

BZA ACTION REQUIRED: YES _____________ NO _____________

ACTION TAKEN: _______________________________________________________________

PERMIT APPROVED ______ DENIED ______ DATE ________________

________________________________________
DIRECTOR OF PUBLIC WORKS or
AUTHORIZED REPRESENTATIVE

Revised 11/1/07
BEGIN APPLICATION HERE:

1. DATA ON APPLICANT(S) AND OWNERS(S):
a. Applicant(s) Name:____________________________________________________
   Address:________________________________________________________________
   Phone # __________________________________________________________________

b. Property Owner(s) Name:_________________________________________________
   Address:________________________________________________________________
   Phone # __________________________________________________________________

c. Agent(s) Name:_________________________________________________________
   Address:________________________________________________________________
   Phone # __________________________________________________________________

2. DATA ON PROPERTY:
a. Address (if applicable)___________________________________________________

b. Zoning District:___________________________________________________________

c. Legal Description: (Write Below or Attach)___________________________________
   _________________________________________________________________________
   _________________________________________________________________________

3. DATA ON OFF-PREMISE SIGN:
a. Previous Permit No:_____________________________________________________

b. Location: CIRCLE ONE N S E W Side Of ___________________________________
   ______ ft. CIRCLE ONE N S E W Of __________________________________________
   Primary Road Secondary Road

c. Size ______ X ______ ft. Gross Area ______ sq. ft.

d. Height _____ ft. From Sign Base ______ or Road Grade ______

e. Type Construction (Check One) Single Face______ Double Face______
   Back -To- Back______ V-Type_______

f. Describe Lighting (If-Applicable)___________________________________________

4. STATE PERMIT REQUIRED: YES_______ (Attach Copy) NO_______
CERTIFICATION:
1. I (We) hereby certify that all of the foregoing statements contained in this application as submitted herewith are true to the best of my (our) knowledge and belief.

<table>
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<th>Signature</th>
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<td>Property Owner(s)</td>
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2. PROPERTY OWNERS SIGNATURE MUST BE NOTARIZED OR ATTACH COPY OF LEASE AGREEMENT.

STATE OF______________________________
COUNTY OF______________________________

On this __________________day of________________, in the year of________________, before me the undersigned notary public, personally appeared__________________________

known to me to be the person(s) whose names(s) is/are subscribed to the within instrument and acknowledged that he/she/they executed the same for the purposes therein contained.

In witness whereof, I hereunto set my hand and official seal.

_______________________________________ Commission Expires_______________
Notary Public