

# Sign Permit

## City of Kosciusko, MS

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

Contractor Information:

Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Property Owner Information:

Name: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Total Cost of Job: \_\_\_\_\_

Fee Schedule: \$15.00 for the first \$1000

\$4.00 for every additional thousand and fraction thereof

Permit Fee: \_\_\_\_\_

\_\_\_\_\_  
Building Official