

City of Athens Building Department
815 North Jackson Street
P.O. Box 849
Athens, TN 37371-0849



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City of Athens Sign Permit Application

Company: _____ Date: _____

Address: _____ State License No.: _____

Expiration Date: _____

Installer: _____ State License No.: _____

Address: _____ Expiration Date: _____

Job Location: _____ Zone: _____

Name of Business: _____

Type of Sign (describe): _____

Height: _____ Wind Speed Design: _____

Type of Electrical Connection: _____ Type of Illumination: _____

Value of Project: _____

Describe scope of work: _____

NOTE: ALL SIGNS EXCEEDING 20' IN HEIGHT MUST HAVE STAMPED DRAWINGS AND BE DESIGNED FOR 80 M.P.H. WINDS.