City of Bryant, Arkansas
Community Development
210 SW 3rd Street Bryant, AR 72022
501-943-0943

SIGN PERMIT APPLICATION

Applicants are advised to read the Sign Ordinance prior to completing and signing this form. The Sign Ordinance is available at www.cityofbryant.com under the Planning and Community Development tab.

Note: Electrical Permits may be Required, Please contact the Community Development Office for more information.

Date: 1/30/2024

Sign Co. or Sign Owner

Name Condray Signs
Address 1107 E Harding Ave.
City, State, Zip Pine Bluff, AR. 71601
Phone 870-534-5210
Email Address emma@condraysigns.com

Property Owner

Name Jusmic Investments LLC
Address 3395 Hwy 5N
City, State, Zip Bryant AR 72019
Phone 501-909-9665
Email Address michelleltfranks@hotmail.com

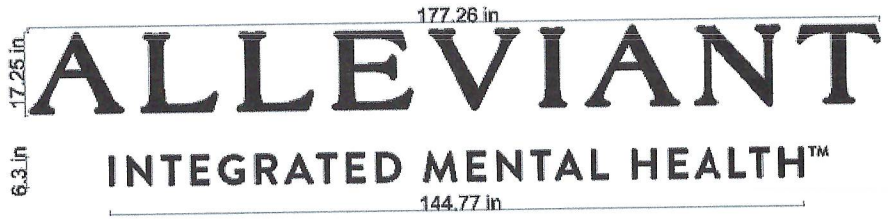
GENERAL INFORMATION

Name of Business Alleviant Intergrated Mental Health
Address/Location of sign 3395 AR.5
Zoning Classification _____

Please use following page to provide details on the signs requesting approval. Along with information provided on this application, **a Site Plan showing placement of sign(s) and any existing sign(s) on the property is required** to be submitted. **Renderings of the sign(s) showing the correct dimensions is also required** to be submitted with the application. A thirty-five dollar ($35) per sign payment will be collected at the time of permit issuance. According to the Sign Ordinance a fee for and sign variance or special sign permit request shall be one hundred dollars ($100). Additional documentation may be required by Sign Administrator.

READ CAREFULLY BEFORE SIGNING

I Emma Brann, do hereby certify that all information contained within this application is true and correct. I fully understand that the terms of the Sign Ordinance supersede the Sign Administrator's approval and that all signs must fully comply with all terms of the Sign Ordinance regardless of approval. I further certify that the proposed sign is authorized by the owner of the property and that I am authorized by the property owner to make this application. I understand





By signing this document, you verify that all spelling, layout and content are correct and that you are satisfied with the design(s) proofed on this document. Designs will be produced as shown here and you cannot make changes once the order is in production. Customer assumes all responsibility for typographical errors.

Please Sign here

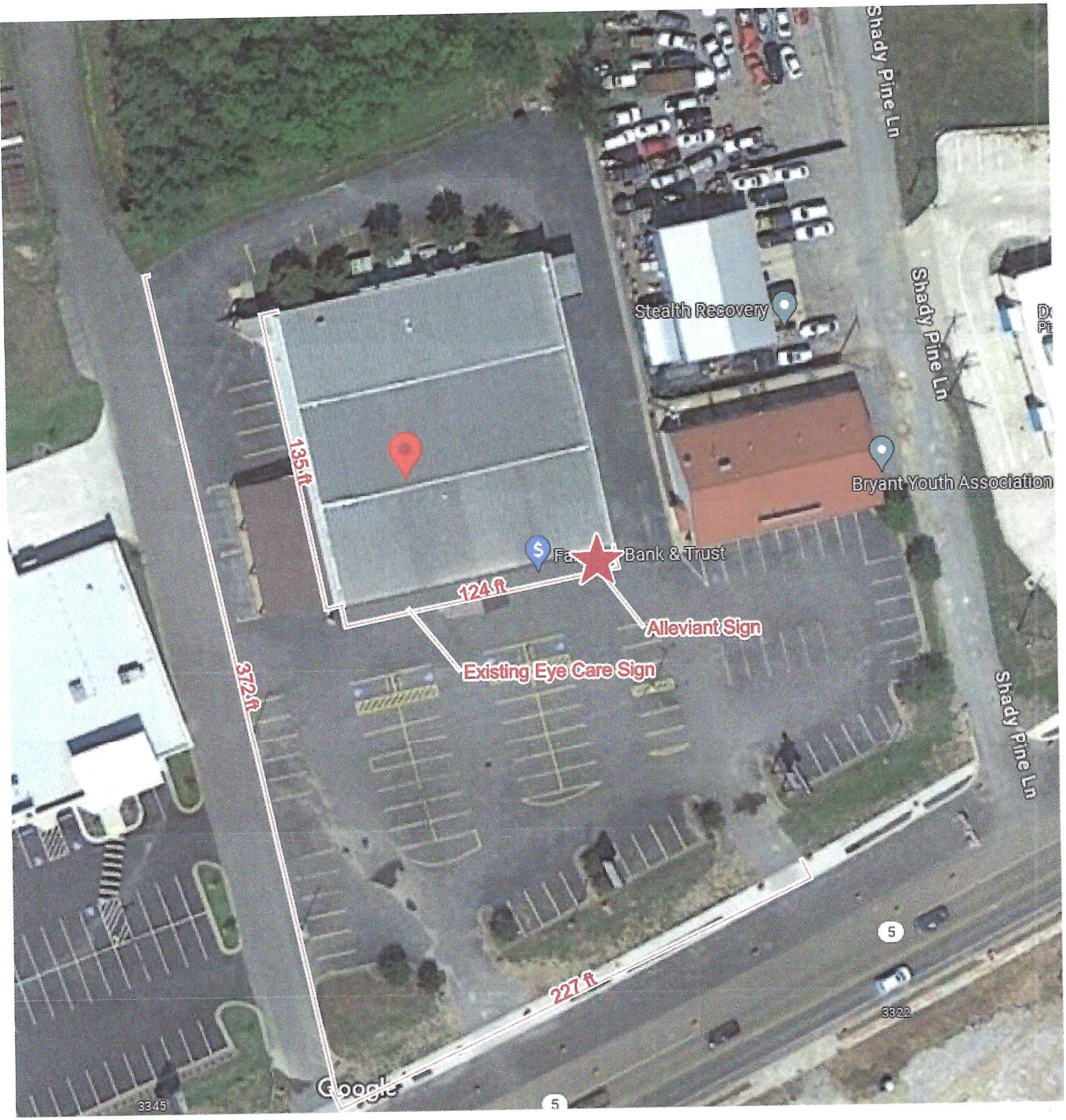
condraysigns .com
1107 E. Harding Ave. Pine Bluff, AR 71601
ph (870) 534-5210

Client: Alleviant Integrated Mental Health
Location: Bryant, AR
Representative: Perry Oldner
Designer: Jason McGee
Date: 1-9-24

File location: \\DESKTOP-CL9TA2O\
Shared Server File\SHARED FOLDER\
graphic files\A\Alleviant Integrated Mental Health
File name: channelletters.fs

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ALLEVIANT
INTEGRATED MENTAL HEALTH℠
262 in
230 in


Shady Pine Ln
Shady Pine Ln
Shady Pine Ln
Stealth Recovery
Bryant Youth Association
Bank & Trust
135 ft
124 ft
372 ft
227 ft
Alleviant Sign
Existing Eye Care Sign
Google
3345
3322
5
5