



SIGN PERMIT

PERSON APPLYING FOR PERMIT

NAME: _____ DATE: _____

ADDRESS: _____

PHONE: _____ BUSINESS PHONE: _____

FAX: _____ EMAIL: _____

FOLLOWING INFORMATION OF PARCEL OWNER

NAME: _____

ADDRESS: _____

PHONE: _____ BUSINESS PHONE: _____

FAX: _____ EMAIL: _____

LOCATION OF BUILDING, STRUCTURE, OR PARCEL IN WHICH SIGN WILL BE ATTACHED OR ERECTED:

POSITION OF SIGN: _____

Please provide a copy of the plans and specifications. The method of the construction and/or attachment to a building, or in the ground, shall be fully explained in the plans and specifications.

PERSON/BUSINESS ERECTING SIGN

NAME: _____

ADDRESS: _____

PHONE: _____ BUSINESS: _____

FAX: _____ EMAIL: _____

ZONING DISTRICT IN WHICH SIGN TO BE PLACED: _____

Any person providing false information under the city's codes of ordinance shall be guilty of a misdemeanor.

Signature of Applicant: _____

Date Permit Submitted: _____ PERMIT: _____ Approved _____ Disapproved

Comments: _____

Certified by _____ Date: _____