

DATE OF APPLICATION: / /



Site Address or Description		Zoning	Lot	Block	Subdivision
Property Owner	Phone #	Address			
	Email				
Applicant	Phone #	Address			
	Email				
Contractor	Phone #	Address			
	Email				

EXISTING SIGNAGE

Type of Sign	Number	Dimension and Location	To be removed?

Proposed Signage:
 Permanent
 Temporary - Installation date: _____ Removal Date: _____

Select the type of sign proposed	Number	Dimensions	Style Details/Description	Illuminated?
<input type="checkbox"/> Public and Institutional				
<input type="checkbox"/> Construction				
<input type="checkbox"/> Development				
<input type="checkbox"/> Pennants and Banners				
<input type="checkbox"/> Searchlights				
Signs listed below are permitted only in Commercial and Industrial Districts				
<input type="checkbox"/> Ground				
<input type="checkbox"/> Wall				
<input type="checkbox"/> Pylon				
<input type="checkbox"/> Projecting				



- Administration Fee – See Fee Schedule
- Site Plan and/or Survey with all applicable requirements
- Scaled drawing of proposed signage in color
 - If mounted on the building, show how the sign will be mounted and the location of the sign.

This is to certify that I am making an application for the described action by the City and I am responsible for complying with all City requirements with regard to this request. This application should be processed in my name, and I am the party whom the City should contact regarding any matter pertaining to this application. I have attached a copy of proof of ownership (either copy of Owner's Duplicate Certificate of Title, Abstract of Title or Purchase Agreement), or I am the authorized person to make this application and the fee owner has also signed this application. I will keep myself informed of the deadlines for submission of material and the progress of this application. I further understand that additional fees may be charged for consulting fees, feasibility studies, etc. with an estimate prior to any authorization to proceed with the study. The documents and information I have submitted are true and correct to the best of my knowledge.

I hereby agree to reimburse the city for all expenses beyond the filing fee cost incurred reviewing and processing the application and materials submitted.

Applicant/Contractor Signature	Property Owner Signature	Date

Zoning Review Comments:	Approved by:	Date:
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