



SIGN PERMIT APPLICATION

Appl: # _____

\$ _____ (Invoice)

3400 Plymouth Boulevard
 Plymouth, MN 55447
 General Information (763)509-5430
 Inspection Scheduling (763)509-5449
 FAX (763) 509-5407

Property Location: _____

~ OR ~

Legal Description: Lot _____ Block _____ Subdivision Name _____

Property I.D. (PIN) No. _____

*For non-invoiced customers, permits may be mailed in or faxed in (if no plans are required).
 You will be called with the permit fee when the permit is ready to be picked up and paid for IN PERSON in Community
 Development at City Hall. Note: Checks are not to be mailed with the permit application.*

Proposed Use:	<u>Residential</u>	<u>Non-Residential</u>
Single Family Detached	<input type="checkbox"/>	Church <input type="checkbox"/>
Townhouse	<input type="checkbox"/>	Commercial <input type="checkbox"/>
Two Family	<input type="checkbox"/>	Industrial <input type="checkbox"/>
Multi-Family	<input type="checkbox"/>	Public <input type="checkbox"/>
		Other _____

Applicant is: Contractor Other Owner Tenant

Are you currently licensed as a sign contractor by the City? Yes No

Are you approved as an Invoice Contractor? Yes No

If yes, are the fees for this permit to be invoiced? Yes No

Name: _____ **Email:** _____

Address: _____ **City:** _____

State: _____ **Zip:** _____ **Telephone No.:** _____

Telephone No.: _____ (Bus., pager, mobile)

Tenant Name (if applicable) _____ **Unit/Suite #** _____

LIST EACH SIGN INDIVIDUALLY BELOW. USE AN ADDITIONAL APPLICATION FORM IF NECESSARY.

<p style="text-align: center;">SIGN #1</p> <p>Sign Type: <input type="checkbox"/> Area ID <input type="checkbox"/> Electronic Graphic Display <input type="checkbox"/> Changeable Copy <input type="checkbox"/> Nameplate <input type="checkbox"/> Directional <input type="checkbox"/> Outdoor Advertising <input type="checkbox"/> Electronic Changeable Copy <input type="checkbox"/> Temporary <input type="checkbox"/> Other _____</p> <p>Class of Sign: <input type="checkbox"/> Freestanding <input type="checkbox"/> Monument <input type="checkbox"/> Wall</p> <p>Illuminated: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate illumination type: <input type="checkbox"/> LED <input type="checkbox"/> Fluorescent, neon or incandescent</p> <p>Height _____ Width _____ Total Square Footage _____</p>	<p style="text-align: center;">SIGN #2</p> <p>Sign Type: <input type="checkbox"/> Area ID <input type="checkbox"/> Electronic Graphic Display <input type="checkbox"/> Changeable Copy <input type="checkbox"/> Nameplate <input type="checkbox"/> Directional <input type="checkbox"/> Outdoor Advertising <input type="checkbox"/> Electronic Changeable Copy <input type="checkbox"/> Temporary <input type="checkbox"/> Other _____</p> <p>Class of Sign: <input type="checkbox"/> Freestanding <input type="checkbox"/> Monument <input type="checkbox"/> Wall</p> <p>Illuminated: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate illumination type: <input type="checkbox"/> LED <input type="checkbox"/> Fluorescent, neon or incandescent</p> <p>Height _____ Width _____ Total Square Footage _____</p>
<p style="text-align: center;">SIGN #3</p> <p>Sign Type: <input type="checkbox"/> Area ID <input type="checkbox"/> Electronic Graphic Display <input type="checkbox"/> Changeable Copy <input type="checkbox"/> Nameplate <input type="checkbox"/> Directional <input type="checkbox"/> Outdoor Advertising <input type="checkbox"/> Electronic Changeable Copy <input type="checkbox"/> Temporary <input type="checkbox"/> Other _____</p> <p>Class of Sign: <input type="checkbox"/> Freestanding <input type="checkbox"/> Monument <input type="checkbox"/> Wall</p> <p>Illuminated: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate illumination type: <input type="checkbox"/> LED <input type="checkbox"/> Fluorescent, neon or incandescent</p> <p>Height _____ Width _____ Total Square Footage _____</p>	<p style="text-align: center;">SIGN #4</p> <p>Sign Type: <input type="checkbox"/> Area ID <input type="checkbox"/> Electronic Graphic Display <input type="checkbox"/> Changeable Copy <input type="checkbox"/> Nameplate <input type="checkbox"/> Directional <input type="checkbox"/> Outdoor Advertising <input type="checkbox"/> Electronic Changeable Copy <input type="checkbox"/> Temporary <input type="checkbox"/> Other _____</p> <p>Class of Sign: <input type="checkbox"/> Freestanding <input type="checkbox"/> Monument <input type="checkbox"/> Wall</p> <p>Illuminated: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate illumination type: <input type="checkbox"/> LED <input type="checkbox"/> Fluorescent, neon or incandescent</p> <p>Height _____ Width _____ Total Square Footage _____</p>

PERMIT FEE SCHEDULE		
Per Sign:	Up to: 32 square feet	\$50.00
	33 to 64 square feet	\$70.00
	65 to 96 square feet	\$90.00
	Over: 96 square feet	\$110.00

Describe Proposed Work: _____

I HEREBY APPLY FOR A SIGN PERMIT AND I ACKNOWLEDGE THAT THE INFORMATION ABOVE IS COMPLETE AND ACCURATE; I UNDERSTAND THIS IS NOT A PERMIT AND WORK IS NOT TO START WITHOUT A PERMIT.

I UNDERSTAND AND HEREBY AGREE THAT THE WORK FOR WHICH THE PERMIT IS ISSUED SHALL BE PERFORMED ACCORDING TO THE FOLLOWING: (1) THE CONDITIONS OF THE PERMIT, (2) THE APPROVED PLANS AND SPECIFICATIONS, (3) THE APPLICABLE CITY APPROVALS, ORDINANCES AND CODES AND (4) THE STATE BUILDING CODE.

I UNDERSTAND THAT THE PERMIT WILL EXPIRE AND BECOME NULL AND VOID IF WORK IS NOT STARTED WITHIN 180 DAYS OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS ANYTIME AFTER WORK HAS COMMENCED; AND, THAT I AM RESPONSIBLE FOR ENSURING THAT ALL REQUIRED INSPECTIONS ARE REQUESTED IN CONFORMANCE WITH THE STATE BUILDING CODE.

Applicant's Signature Date

Please Print Applicant's Name

For Plan Review Use Only	
<p>Inspection Types (to be checked): <input type="checkbox"/> Final <input type="checkbox"/> Footing</p> <p>Authorized For Issuance: <input type="checkbox"/> Yes <input type="checkbox"/> No If not, why? _____</p> <p>Permit Purpose (Remarks) _____ _____ Signature: _____ Date: _____</p>	<p>Planning Division Approval: _____</p> <p>Date: _____</p> <p><input type="checkbox"/> Verified zoning district and reviewed sign regulations</p> <p><input type="checkbox"/> If freestanding sign, setback, height and area verified</p>