



SIGN PERMIT APPLICATION

Date: _____ Address of Sign Location: _____ **Center Line, MI 48015**

OWNER INFORMATION – (All Information is Mandatory)

Name: _____ Driver's License: _____
(As it appears on Driver's License) *(State Issued)*

Address: _____ City: _____ State: _____ Zip: _____
(Street Address Only, No PO Box)

Work Phone: _____ Cell Phone: _____ FAX: _____

Email: _____ Date of Birth: _____

CONTRACTOR INFORMATION - (All Information is Mandatory)

Name: _____ Driver's License: _____
(As it appears on Driver's License) *(State Issued)*

Address: _____ City: _____ State: _____ Zip: _____
(Street Address Only, No PO Box)

Work Phone: _____ Cell Phone: _____ FAX: _____

Email: _____ Date of Birth: _____

SIGN APPLICATION REQUIREMENTS:

FOR ALL APPLICATIONS – Must submit two (2) drawings of the sign with message and dimensions; and whether or not the sign will include LED/HD video or graphics.

FOR WALL SIGN APPLICATIONS – Must submit two (2) drawings showing the width of the front of the building and exact location of the sign.

FOR GROUND/ROOF/POLE SIGN APPLICATIONS – Must submit two (2) copies of the plot plan for the property, showing exact location of the sign.

NOTE: FLASHING, LED OR HD VIDEO OR GRAPHICS SIGNS MUST MEET MINIMUM CODES FOR CHANGE OF MESSAGE AND FLASHING. NO SIGNS MAY CAUSE A NUISANCE TO NEIGHBORING PROPERTIES.

OFFICE USE ONLY

	<u>FEES</u>	<u>PAID</u>
Permit	_____	_____
Registration	_____	_____
Investigation	_____	_____
Other	_____	_____
Total	_____	_____
Okay to Issue	Yes / No Hold (circle one)	
Correction/Violation Notice Issued?	Yes / No	
Authorized:	_____	
Date of Approval:	_____	

SIGN DETAILS:

Length: _____ x Width: _____ = Total Sq. Ft.: _____

Height: _____ Thickness: _____ Value of Sign: _____

Sign Type: POLE GROUND LED/HD ROOF TOP ATTACHED NEON OTHER: _____
(CIRCLE ONE)

Number of Sides: _____ Illuminated (Includes LED/HD): YES NO

Materials: Face: _____ Frame: _____

 Signature of Applicant Date

ELECTRICAL CONTRACTOR: _____ Testing Lab #: _____