## **SIGN PERMIT APPLICATION**

Planning Department, City of Grand Haven 519 Washington Avenue, Grand Haven, MI 49417

Phone: (616) 935-3276 Email: zoningpermits@grandhaven.org

\*\*\*Each sign requires a separate application\*\*\*

1. Project Information		
Address/location of property:		
Bldg. elevation width: Bldg. elevation height:		
Zoning District:	Name of Development:  3. Property Owner	
2. Contractor		
Name:	Name:	
Company:	_ Address:	
Address #:	DI //	
<b>П</b>	Phone #:	
Phone #:Email:	Email:	
4. Required Attachments		
<ul><li>Copy of sign artwork</li></ul>	<ul> <li>A site plan and engineering if application is for a</li> </ul>	
<ul> <li>Image of sign on building elevation</li> </ul>	pylon sign	
<ul> <li>Site sketch showing sign location and</li> </ul>	<ul> <li>Application requires signature of property owner</li> </ul>	
setbacks if application is for ground or pole	unless an affidavit is provided.	
sign	<ul> <li>Required Fee</li> </ul>	
6. Location of Sign (indicate building elevation and	sethacks)	
	seriouens)	
7. Type of Sign(s)		
Wall:	Pole:	
Ground:	Awning:	
Projecting:	Portable:	
Temporary:	Dates Displayed:	
8. <b>Size of Sign</b> (see Section 40-705 for type and size of	f sign permitted by zoning district)	
Overall Height:	Overall Width:	
Overall Depth:	Sign Area (Square Feet):	
Overall Depth:  Ground Clearance (pole sign):	Number of Sides (ground or pole):	
& GRAND	. ,	



9. Materials/Style*		
Metal:	Wood:	
Plastic:	Painted:	
Other:		
Source (circle one): Internal	Height from	nitted by zoning district)  Fixtures proposed: n grade (if applicable):
	ng Permit with the Dept. of Public S graded lighting require an Electrical	Safety   Permit with the Dept. of Public Safety
Department.  ☐ The application mus	Permit Application is to be sur t be signed by the owner unless an a lating signage are provided in Arti	bmitted to the Planning and Building affidavit is provided. cle Seven, Section 40-700 of the Grand
12. Fees: Sign Permit Fee: \$35.00 Banner Permit Fee: \$25.00		
By signing below, the applicant agrees to perform the described work in accordance with all applicable sections of the City of Grand Haven Code of Ordinances. Signer will insure that all inspection requests are made a minimum of 24 hours prior to the requested time.		
Signature of Contractor:		Date:
Print Name:		
Signature of Owner:		Date:
Print Name:		
	Office Use Only	
Permit #:	Date Received:	Fee:
Date of Approval:	Date of Denial:	Approved by:

