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: Name of Development: 3. Property Owner Name: Address:	
Zoning District:		
2. Contractor		
Name:		
Company:		
Address #:		
Phone #:	_ Email:	
Email:	_	
4. Required Attachments		
Copy of sign artwork	 A site plan and engineering if application is for a 	
 Image of sign on building elevation 	pylon sign	
 Site sketch showing sign location and 	 Application requires signature of property owner 	
setbacks if application is for ground or pole	unless an affidavit is provided.	
sign	Required Fee	
6. Location of Sign (indicate building elevation and	setbacks)	
7. Type of Sign(s)		
Well	Dolor	
Wall:Ground:		
·	_	
Projecting:		
Temporary:	Dates Displayed:	
8. Size of Sign (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):	
Ground Clearance (pole sign):		
GRAVA	÷ 1 /	



9. Materials/Style*		
Metal:	Wood:	
Other:		
Source (circle one): Interna	Height from	f Fixtures proposed: m grade (if applicable):
	ling Permit with the Dept. of Public pgraded lighting require an Electrica	Safety al Permit with the Dept. of Public Safety
Department. □ The application must	n Permit Application is to be su st be signed by the owner unless an a ulating signage are provided in Art	affidavit is provided. cicle Seven, Section 40-700 of the Grand
12. Fees: Sign (free standing, project Sign or Banner (temporary		<i>l)</i> Permit Fee: \$50.00 + \$0.50 per sq. ft.
applicable sections of the		lescribed work in accordance with all Ordinances. Signer will insure that all 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:

