Date: ___Received by:_____$50.00: Check or Cash

SIGN PERMIT APPLICATION

NAME AND ADDRESS OF **PROPERTY OWNER:**_____

_____

NAME AND ADDRESS OF **SIGN COMPANY:**_____

_____

NAME AND ADDRESS OF **BUSINESS:**_____

(SIGN LOCATION)

_____

HAS PROPERTY OWNER GRANTED PERMISSION? _____ ***ATTACH LETTER APPROVING SIGNAGE FROM PROPERTY OWNER.***

PHONE NUMBERS : _____ ___ _____ _____

PROPERTY OWNER **SIGN COMPANY** **BUSINESS**

PROPERTY INFORMATION:

PROPERTY LOCATION/ADDRESS:_____

SIZE OF TRACT (IN SQUARE FEET):_____

ZONING OF PROPERTY:_____

INVENTORY OF EXISTING SIGNS ON PROPERTY (LIST THE SIGN SURFACE AREA AND TYPE, E.G. GROUND, WALL, ETC.). SEE SIGN REGULATIONS FOR DEFINITIONS. **MUST BE COMPLETED!**

SIGN TYPE	SIGN SURFACE AREA

SIGN INFORMATION:

TYPE OF SIGN REQUESTED (REAL ESTATE, POLE, WALL MOUNTED, ETC.):_____

PROPOSED HEIGHT OF SIGN:_____

PROPOSED DIMENSIONS AND AREA OF SIGN:_____

COLORS, LETTER SIZE AND FONT:_____

ILLUMINATED SIGNS SHALL HAVE ALL ELECTRICAL COMPONENTS UL LISTED.

Electrician: _____

PROVIDE PICTURE/ORAWING OF REQUESTED SIGN

TIME/DURATION: PERMANENT 30 DAYS 60 DAYS OTHER

BUILDING PERMIT & ***REVIEW FEE:*** A **$50.00** ACCESSORY REVIEW FEE IS REQUIRED AT TIME OF APPLICATION.

PLEASE ATTACH A COPY OF YOUR SITE PLAN SHOWING THE LOCATION OF EXISTING AND PROPOSED SIGNS. PLEASE INDICATE SETBACKS.

CERTIFICATION

I certify that I have received a copy of the Sign Regulations for the City of Lake Saint Louis, that I have read them and understand them, and that the sign for which I am requesting a permit does and will comply with all applicable provisions contained therein.

Name: _____

(Printed)

Signature:_____

ALL CONTRACTORS ARE REQUIRED TO HAVE A BUSINESS LICENSE IN THE CITY OF LAKE SAINT LOUIS.