

Business Occupant Name	
Contact / Title	
Street Address	
Legal Description or PIN #	
Telephone / Fax:	
Sign Contractor Name	
Contact	
Street Address	
City, ST Zip	
Telephone / Fax:	
MN License #	

**BUILDING & PROPERTY MEASUREMENTS**

DIMENSION	A. Front Street Measurement	B. Side Street Measurement	C. TOTAL ( A + B )
1. GROSS PROPERTY	A.	B.	C. (1A+1B)
2. NET BUILDING	A.	B.	C. (2A+2B)
3. NET PROPERTY	A. (1A-2A)	B. (1B-2B)	C. (3A+3B)
4. ALLOWED SIGNAGE	A. (2C x 2.0 s.f.)	B. (2B x 1.0 s.f.)	C. (4A + 4B)

The aggregate area allowance for signs at any business location is 2.0 s.f. per front/side foot of building plus 1.0 s.f. per front/side lot footage less footage of building. Complete the table above to determine the amount of sign area allowed. If more than 3 signs total, submit separate calculations.

**PROPOSED SIGN TYPE(S) & SIZE(S)**

**If more signs than shown, attach separate list**

SIGN TYPE (wall, eave, pole, etc)	SIGN WIDTH (inches)	SIGN HEIGHT (inches)	SIGN SIDES (1 sided or 2 sided)	SQUARE FEET (A x B x C)
1.	A. inches	B. inches	C. inches	D. sq. Inches
2.	A. inches	B. inches	C. inches	D. sq. Inches
3.	A. inches	B. inches	C. inches	D. sq. Inches
4. PROPOSED SIGNS	A. sq. Inches ( 1D + 2D + 3D )		B. Sq. Feet ( 4A / 144 )	

Sign #1 Diagram	Sign #2 Diagram	Sign #3 Diagram
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**NOTE:** This application must be accompanied by a scale drawing of each proposed sign for the property indicating whether the sign is electric or not and whether illumination of the sign will be required. In the case of sign illumination, each sign must specify type and rating of illumination.

**NOTE:** If the proposed sign is temporary, the period of time it will be in place must be stipulated.

**NOTE:** The undersigned hereby makes application for a permit to do heating, ventilating and/or air conditioning work as herein specified, agreeing to do all work in strict accordance with the Minnesota Mechanical Code. The undersigned further states that all statements herein are true and that all work herein mentioned will be done in accordance with City Ordinances, the State of Minnesota, and rulings of the Inspection Department. This Permit may be revoked upon violation of any of the above stipulations and provisions

Applicant Signature	Date:
City Clerk Signature	Date:
Zoning Administrator Signature	Date:

**NOTE:** If this application is denied or the permit revoked, reason for denial or revocation must be submitted to Applicant in writing.