



Sign Permit Application

<u>Office use only</u>
Permit # _____

Site Address		Date	
Tenant/Building name		Suite/Unit #	
Applicant/Primary Contact Name: <input type="checkbox"/> Contractor <input type="checkbox"/> Owner		e-mail address:	
Property Owner			
Name		Phone	
Address	City	State	Zip
Contractor/Installer			
Business Name	Licensed with the City? <input type="checkbox"/> Yes _____ (date) <input type="checkbox"/> No	Phone	
Address	City	State	Zip
Contact person		e-mail	
Sign Designer/Manufacturer			
Business Name		Phone	
Address	City	State	Zip
Contact person		e-mail	
Principal Use of Property			

- Commercial Business
 Residence
 Public/Institutional

Type of Signs Proposed

Check as many as apply

- How many Signs are proposed? _____
- | | |
|---|--|
| <input type="checkbox"/> Wall | <input type="checkbox"/> Menu |
| <input type="checkbox"/> Freestanding | <input type="checkbox"/> Sidewalk |
| <input type="checkbox"/> Projecting | <input type="checkbox"/> Identification |
| <input type="checkbox"/> Billboard/Off-premise | <input type="checkbox"/> Awning/Canopy |
| <input type="checkbox"/> Portable | <input type="checkbox"/> Banner |
| <input type="checkbox"/> General Development | <input type="checkbox"/> Directional/Traffic Control |
| <input type="checkbox"/> Other _____ (please describe) | <input type="checkbox"/> Dynamic |
| <input type="checkbox"/> Temporary Sign _____ (date of placement) | _____ (date of removal) |

Will the sign(s) have lighting? No Yes (please describe) _____

Project details

Please provide the following information **to scale on illustration(s)**. Use as many illustrations as necessary to provide information showing that the proposed sign meets all standards. Include:

- Sign Dimensions (height, width, depth)
- Proposed Materials (for sign face and any posts or hanging apparatus)
- Proposed lighting (location & brightness)
- For Freestanding Signs show
 - Map or aerial photo with property lines and distances of the sign from these
 - Show dimensions of sign face and sign structure
- For Attached Signs show
 - Location on the building
 - Clearance underneath sign (distance between bottom of sign and ground)

Show also the location and sizes of all *existing signs* on the property which will remain.

Please read and sign

I hereby apply for a building permit and I acknowledge that the information above is complete and accurate; that the work will be done in conformance with the ordinances and codes of the City of Albert Lea and the Minnesota State Building Code; that I understand this is not a permit but only an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plan in the case of all work which requires review and approval of plans.

_____ Applicant printed name

_____ Applicant signature

_____ Date

Do not write below this line-for office use only

Zoning District: _____

Historic District? No Yes approved _____ (date)

CUP/IUP or PUD? No Yes approved _____ (date)

Total Sign Square Footage: _____

Fee is \$.50 per each square foot \$10.00 minimum/\$100.00 maximum

Permit Fee \$ _____

Application Accepted _____ (date)
As Complete

Permit approved by _____ Date _____

COMPLETE INFORMATION ON SIGN REGULATIONS IN THE CITY OF ALBERT LEA CAN BE FOUND IN ARTICLE IV OF THE ZONING ORDINANCE, CHAPTER 74 OF CITY CODE.