

SIGN PERMIT APPLICATION

City of Owosso Building Department 301 W. Main Street, Owosso, MI 48867
Phone: (989) 725-0535 building@ci.owosso.mi.us

1. PROPERTY ADDRESS:				
Zoning District:		DDA/HDC district?		
2. PROPERTY OWNER INFORMATION:				
Name:		Company Name:		
Address:				
Phone Number:		Email:		
Signature:		Date:		
3. BUSINESS OWNER IN	FORMATION: (if different	than property own	er)	
Name:		Company Name:		
Address:				
Phone Number:		Email:		
Signature:		Date		
4. CONTRACTOR INFOR	MATION:			
Name:		Company Name:		
Address:				
Phone Number:		Email:		
License Number:		Expiration date:		
Signature:		Date:		
The provisions regulating signal signing, the contractor agrees Owosso Code of Ordinances. requested time.	to perform the described wor	k in accordance with all	l applicab	le sections of the City of
SIGN INFORMATION:				
□ Awning	☐ Ground	□ Pole		Projecting
□ Wall	Temporary	☐ Temporary of		. ,
Height:	Width:	Depth:	So	ղ. footage:
Pole sign ground clearance:		Ground/pole # of sides:		
Sign material:	□ Metal	□ Plastic		□ Wood
□ Painted		□ Color		
Lighting source: internal or external		Number of fixtures:		
Type of lighting:		Height from grade: (if applicable)		
Include Sign location/setbacks for ground/pole sign		Include Image of sign on building		
Include Copy of sign artwor	k			
SIGN PERMIT FEE				
Base fee \$40	Square footage of sign at \$0.60 per sq. ft.	Inspection fee \$50		Total fee:
OFFICE USE ONLY	Square footage of sign at \$0.60 per sq. ft.	Inspection fee \$50		Total fee:
·			Permit #	