

SIGN PERMIT APPLICATION

City of Grand Haven, 20 N. Fifth Street, Grand Haven, MI 49417
Phone: (616) 847-3490 Fax: (616) 844-2051 Website: www.grandhaven.org

****Each sign requires a separate application****

1. Project Information

Address/location of property: _____
Bldg elevation width: _____ Bldg elevation height: _____
Zoning District: _____ Name of Development: _____

2. Contractor

Name: _____
Company: _____
Address #: _____
Phone #: _____
Fax #: _____

3. Property Owner

Name: _____
Address: _____
Phone #: _____
Fax #: _____

4. Required Attachments

- Copy of sign artwork
- Image of sign on building elevation
- Required fee
- A site plan and engineering if application is for a pylon sign
- Application requires signature of property owner unless an affidavit is provided.

5. Details of the nature of work proposed *(identify materials and colors to be used)*

6. Location of Sign *(indicate building elevation)*

7. Type of Sign(s)

Wall _____ Pylon _____
Ground _____ Awning _____
Banner _____ Dates Displayed (Banner) _____
Other _____

8. Size of Sign

Width: _____ Height: _____
Depth: _____ Total Square Feet: _____
Height of Lettering: _____ Number of Sides (for ground or pylon): _____



Address/Location of Property: _____

9. Materials/Style

Metal: _____ Wood: _____
Plastic: _____ Painted: _____
Other: _____

10. Sign Lighting (see Section 40-701 for type of sign lighting permitted by zoning district)

Source(circle one): Internal or External Number of fixtures proposed: _____
Type of lighting proposed: _____ Height from grade (if applicable): _____
Name of Electrician: _____

11. Sign Permit Application Procedures

- The complete Sign Permit application is to be submitted to the Planning and Building Department.
- The application must be signed by the owner unless an affidavit is provided.
- The provisions regulating signage are provided in Article Seven, Section 40-700 of the Grand Haven Zoning Ordinance.

12. Fees:

Sign Permit Fee: \$35.00 + \$0.40 per square foot
Banner Permit Fee: \$25.00

By Signing below, the applicant agrees to perform the described work in accordance with all applicable sections of the City of Grand Haven Code of Ordinances. Signer will insure that all inspection requests are made a minimum of 24 hours prior 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: _____

