



# SIGN PERMIT APPLICATION

## CONSTRUCTION AND BUILDING

City Hall: 301 E. Huron St., Ann Arbor, MI 48104-6120  
 Mailing: P.O. Box 8647, Ann Arbor, MI 48107-8647  
 Phone: 734.794.6263 ext. 0 [building@a2gov.org](mailto:building@a2gov.org)  
 Fax: 734.994.8460

OFFICE USE ONLY	
Permit Number	SIGN# _____
DATE STAMP	

### APPLICATION MUST BE FILLED OUT COMPLETELY

**AUTHORITY: PA. 230 of 1972, AS AMENDED**  
**PENALTY: PERMIT WILL NOT BE ISSUED**

Permission is requested by the Contractor and by the Owner to perform work as describe below and in the following pages, and as shown to the attached plans. **You must submit two (2) hardcopies and one (1) optimized digital version of plans.**


### SIGN LOCATION

PROPERTY ADDRESS (Street No. and Name)	BUSINESS NAME
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### PROPERTY OWNER

NAME:			ADDRESS	
CITY	STATE	ZIPCODE	PHONE/CELL # (AREA CODE)	
EMAIL ADDRESS			FAX	

### SIGN CONTRACTOR / ERECTOR

LAST NAME/ BUSINESS NAME			PHONE/CELL # (AREA CODE)	
ADDRESS			FAX	
CITY	STATE	ZIPCODE		
INSURANCE CARRIER NAME		POLICY #	EXPIRY DATE	
CONTRACTOR/APPLICANT SIGNATURE			DATE	
				

**HISTORIC DISTRICT?**  No  Yes District: \_\_\_\_\_

Approval: \_\_\_\_\_ HDC# \_\_\_\_\_

### VALUE OF WORK

Includes material and labor for scope of permit, excluding mechanical, electrical and plumbing. Mechanical, electrical and plumbing to obtain separate permits.	\$ _____
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### SIGN INFORMATION

<b>REQUIRED INFORMATION</b>	Building Footage:			
	SetBack ( <i>property line to the nearest edge of the sign</i> ):			
	Sign Dimensions:	Horizontal (ft)	Vertical (ft)	Area sq.ft
	Height (from grade):			
	Weight:			
	Sign Material:			
	Method of Attachment:			
	Total Existing Signage for the Business:			



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<b>CHECK ALL THAT APPLY</b>	<b>TYPE OF SIGN</b>						
	<input type="checkbox"/> Awning	<input type="checkbox"/> Banner	<input type="checkbox"/> Ground Pole	<input type="checkbox"/> Marquee	<input type="checkbox"/> Monument	<input type="checkbox"/> Projecting	<input type="checkbox"/> Roof
	<b>SIGN USE:</b>						
	<input type="checkbox"/> Identification		<input type="checkbox"/> Advertising		<input type="checkbox"/> Business		
	Is the sign illuminated?		<input type="checkbox"/> No	<input type="checkbox"/> Yes	<b>If Yes, an Electrical permit is required.</b>		
	<b>ILLUMINATED:</b>						
	<input type="checkbox"/> Incandescent	<input type="checkbox"/> Fluorescent	<input type="checkbox"/> Neon	Approval Lab: _____	Listing #: _____		
	<b>PLACEMENT:</b>						
<input type="checkbox"/> On Premise		<input type="checkbox"/> Off Premise					
<b>TEMPORARY:</b>							
<input type="checkbox"/> Real Estate		<input type="checkbox"/> Commercial	<input type="checkbox"/> Residential	<input type="checkbox"/> Vacant Lot	<input type="checkbox"/> Construction		

## SIGN/SKETCH AND ATTACHMENT / DETAIL

<input type="checkbox"/> Attached Information	<input type="checkbox"/> Single Faced	<input type="checkbox"/> Double Faced
_____ Number of Signs		
DESCRIPTION OF WORK:		

## LOCATION / SITE PLAN:

<input type="checkbox"/> Attached Information

## OFFICE USE ONLY

<input type="checkbox"/> Permit Approved	<input type="checkbox"/> Permit Disapproved
INSPECTOR:	DATE
COMMENTS / REMARKS:	SIGN PERMIT FEE:** \$ _____

**\*\* Sign Permit Fees do not include any fees for building, electrical or mechanical permits that may apply**