



6878 Belding Road NE, Rockford, MI 49341 \* Ph. (616) 874-6966 \* Fax: (616) 874-8940 \* www.cannontwp.org

## Sign Permit Application

### Owner/Applicant Details:

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Date of Application: \_\_\_\_\_

Business or Subdivision Name \_\_\_\_\_

Owner Name \_\_\_\_\_ Owner Email \_\_\_\_\_ Owner Phone \_\_\_\_\_

Address of Proposed Sign \_\_\_\_\_ Zoning District \_\_\_\_\_

Applicant Name \_\_\_\_\_ Applicant E-Mail \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

### Sign Details:

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Type of sign: \_\_\_ Wall Sign \_\_\_ Ground Mounted Sign \_\_\_ Temporary Sign\*

#### Temporary Sign Details:

\*Temporary sign may go up 10 days prior to event and must be removed no later than 48 hours after. Please provide dates:

From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Name of Event: \_\_\_\_\_

Height \_\_\_\_\_ Width \_\_\_\_\_ Total Square Footage \_\_\_\_\_

#### Ground and Wall Sign Details:

Will the sign be illuminated? \_\_\_ yes \_\_\_ no

Height \_\_\_\_\_ Width \_\_\_\_\_ Total Square Footage \_\_\_\_\_

#### Please attach the following:

1. Site plan showing location of the building, structure, or lot upon which the sign is to be attached or erected and showing the proposed sign in relation to buildings and structures with setback from lot lines.
2. Two sets of renderings, method of construction and attachment to structures or ground. Sign may require a Building Permit if a footing is required.

\_\_\_\_\_  
Signature of Property Owner Date

\_\_\_\_\_  
Signature of Applicant Date

Zoning Administrator Approval
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