

APPLICATION FOR SIGN PERMIT
Metamora Township

(810) 678-2237
730 West Dryden Road, Metamora, MI 48455

APPLICANT'S NAME _____

ADDRESS _____

CITY _____ ZIP CODE _____ PHONE _____

NAME OF BUSINESS OR ACTIVITY REQUIRING SIGN _____

BUSINESS ADDRESS, IF ISSUED _____

SIGN DESIGNER / INSTALLER _____

BUSINESS ADDRESS _____

TELEPHONE (_____) _____

EXISTING ZONING _____ EXISTING USE _____

REQUIRED PLANS ATTACHED Site Sketch
 Building Elevations
 Scale Drawing Of Each Sign

ESTIMATED COMPLETION DATE OF PROPOSED PROJECT _____

ARE YOU THE SOLE LEGAL OWNER OF PROPERTY? YES NO

Provide names, addresses and signatures for all persons with a legal or financial interest in the property. All persons having legal interest in the property must sign this application.

Name (Please Print)	Address	Interest	Signature
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

I do hereby swear that all the statements, signatures, descriptions and exhibits submitted on or with this application are true and accurate to the best of my knowledge and that I am authorized to file this application and act on behalf of all owners of the property.

Signature of Applicant _____ Date _____

Office Use Only

Date Received _____ By: _____ Fee Paid: _____

Planning Commission Meeting (Date) _____ Action: Approved Denied

Conditions _____