APPLICATION DATE:	
EXPIRATION DATE:	

bEB	MIT	NIIIN	ΛRFR

PERMIT FEE ISSUANCE FEE \$10.00 LOCATE FEE \$5.00

CITY OF WILLARD

Sign Permit

D	. T C 4.5	
Property	Informati	on

<u> </u>				
Address:				
Lot #: Zoning: Parcel ID:	Section/Township/Range:			
Applicant and Contractor Information				
Owner:	Phone:			
Address (city, state, zip):				
Contractor:Address (city, state, zip):	Phone:			
Type of Sign O Billboard On Premise Off Premise Neighborhood Temporary Permanent Attached Wall Sign Roof Sign Pole Sign	Improvement Detail Location: ○ Residential ○ Commercial Features included: ○ Electric Dimensions: X Total Sq. Ft Distance from grade to sign center: Distance from grade to top of sign: Length of building wall frontage: Total Cost of Project: \$			
Required Documentation and Licensing Sketch Plan, to-scale Business License for Contractor, if applicable. License # I hereby certify that the information provided on this application is true and correct; that I have read and understand the procedures, ordinances, and requirements associated with the application and review process. I also understand that this application will expire within 180 days of the date of my signing, unless extended by the building inspector pursuant to a written request for extension received prior to the expiration date. Furthermore, I acknowledge that I will be responsible for any, and all costs incurred by plan reviews performed by consultants of the city, certified mailing or publication costs for required legal notice, and recording fees. These costs may be paid by the city and reimbursed by the applicant upon invoicing.				
Owner/Contractor:	Date:			