

Date \_\_\_\_\_

License No. \_\_\_\_\_

# City of Saint Peter Sign Permit Application

Location of Sign \_\_\_\_\_

Name of Applicant \_\_\_\_\_

**PROPERTY OWNER**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone No. \_\_\_\_\_

**CONTRACTOR**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone No. \_\_\_\_\_ License No. \_\_\_\_\_

**SIGN DIMENSIONS, PLACEMENT, ILLUMINATION, COLOR(S), LETTERING ETC.**

Dimensions \_\_\_\_\_ Illumination YES \_\_\_\_\_ NO \_\_\_\_\_

Color(s) \_\_\_\_\_ Letter Style \_\_\_\_\_

Total Sq. Footage of Sign \_\_\_\_\_  
*(Attach Any Documents)*

Zoning District \_\_\_\_\_ Zoning Approval \_\_\_\_\_ HPC Approval \_\_\_\_\_ Plan Approval \_\_\_\_\_

Building & Planning Approval \_\_\_\_\_

Value of Sign \_\_\_\_\_

Permit Fee \_\_\_\_\_

ISSUED BY \_\_\_\_\_

