

SIGN PERMIT APPLICATION

Area Metropolitan Services Agency

Please make your check payable to and send it to, the appropriate jurisdiction noted.

Please mark box for appropriate jurisdiction.

- | | | | | |
|---|---|--|--|--|
| <input type="checkbox"/> Bedford Township
115 S Uldriks Drive
Battle Creek, MI 49017
ph: 269-965-9096
fx: 269-965-0908 | <input type="checkbox"/> City of Battle Creek
10 N Division St, Ste 111
Battle Creek, MI 49014
ph. 269-966-3382
fx. 269-966-3654 | <input type="checkbox"/> Pennfield Township
20260 Capital Ave NE
Battle Creek, MI 49017
ph. 269-968-4422
fx. 269-968-2021 | <input type="checkbox"/> City of Springfield
601 Avenue A
Springfield, MI 49015
ph. 269-965-3880
fx. 269-965-0114 | <input type="checkbox"/> Newton Township
7988 G Drive South
Ceresco, MI 49033
ph. 269-979-3212
fx. 269-979-4470 |
|---|---|--|--|--|

Administrative Section:

- Cash**
 Check # _____ **Receipt #** _____ **Inspector Approval** _____ **Issued Permit #** _____
Zoning Administrator Approval _____ **Date** _____

I. JOB LOCATION

NAME OF BUSINESS AND BUSINESS OWNER	HAS AN ELECTRICAL PERMIT BEEN OBTAINED FOR THIS PROJECT? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
STREET ADDRESS & JOB LOCATION (STREET NO. & NAME)	ZONING CLASSIFICATION
JOB SITE TELEPHONE	CELL NUMBER
	FAX
NUMBER OF EXISTING SIGNS	TOTAL SQUARE FOOTAGE OF EXISTING SIGNS

II. SIGN CONTRACTOR (if applicable)

NAME	ADDRESS	CITY/STATE	ZIP
PHONE NUMBER	FAX NUMBER	E-MAIL ADDRESS	

III. ELECTRICAL CONTRACTOR (if applicable)

NAME	ADDRESS	CITY/STATE	ZIP
PHONE NUMBER	FAX NUMBER	E-MAIL ADDRESS	

IV. LOCATION OF SIGN

V. COST OF SIGNS

- On Premise Sign
 Off Premise Sign

In Battle Creek, call the Planning Department at 966-3320 before submitting an application for an off premise sign.

Portable/Temporary Sign	Permanent Sign
Administration Fee \$25	Administration Fee \$50
Zoning Approval \$15	Zoning Approval \$25
Inspection Fee \$25	Inspection Fee (1 st \$1,000 of Cost) \$50
Plan Review (if applicable) \$25	Each Addl \$1,000 \$20
	Plan Review (if applicable) \$25
Total Fee Paid:	Total Fee Paid:

VI. SIGN INFORMATION

QUANTITY	TYPE OF SIGN (FASCIA, ROOF, POLE, ETC)	TYPE OF MATERIAL	LENGTH		WIDTH		NUMBER OF SIDES	TOTAL DISPLAY AREA	HEIGHT ABOVE STREET	
			FT	IN	FT	IN			FT	IN

APPLICATIONS MUST INCLUDE CONSTRUCTION DRAWINGS AND SITE PLAN

VII. COMMENTS/DESCRIPTION

DRAWING SPACE PROVIDED ON BACK SIDE

