## **City of Algonac**

805 St. Clair River Drive, PO Box 454 Algonac, MI 48001 810-794-9361. www.cityofalgonac.org.

## **Sign Permit Application**

1. APPLICANT			DATE:	
Name		Street Addres	ss	
City	State	Zip Code	Cell Phone	
Home Phone		Email Address	S	
Name of Business:				
2. ELECTRICAL CONTRACTO				
Name		Street Addres	S	
City	State	Zip Code	Cell Phone	
Email Address				
3. CONTRACTOR INSTALLIN	G SIGN, IF APPL	ICABLE.		
Name		Street Addres	s	
City	State	Zip Code	Cell Phone	
Email Address				
4. TYPE OF SIGN				
☐ Freestanding Sign		Pole Sign		☐ Temporary Sign
Ground Sign		Portable Sign		Wall Sign
5. SIZE OF SIGN				
Front Length	x Width	=	Square Feet	Height:
Back Length	x Width	=	Square Feet	Height:
6. ESTIMATED COST OF CONSTRUCTION: \$				
7. SIGNATURE REQUIRED				
Applicant Signature:			Date:	

8. ADDII	IONAL REQUIREMENTS
	Applicant and contractor(s) are responsible for reviewing the city of Algonac Sign Ordinance, Chapter 50 Section 456 SIGNS, for any additional requirements at:  https://library.municode.com/mi/algonac/codes/code of ordinances?nodeId=PTIICOOR CH50ZO ARTXVGEPR S50-456SI.
	Electrical permit, if applicable.
9. ATTAC	CHMENTS REQUIRED
Loca	ation of building, structure or lot where sign is to be attached or erected.
Posi	ition and location of sign in relation to nearby buildings or structures.
☐ Two	(2) blueprints or drawings of the plans, specifications and methods of construction and attachment to building or ground.
☐ Wri	tten consent of owner if the sign is to be erected on vacant land.
☐ Insu	rrance policy or bond may be required by city.
	IT FEE: \$100
SSUED BY:	DATE:
SPECIAL CO	NDITIONS:
	PERMIT NUMBER: