



CITY OF MANCHESTER
 912 CITY ROAD
 MANCHESTER, MI 48158
 (734) 428-7877 FAX: (734) 428-1877

APPLICATION FOR PERMIT TO ERECT A SIGN

Application Date: _____

APPLICANT IDENTIFICATION:

Name: _____ Telephone: _____

Address: _____

Owner Name: _____ Telephone: _____

Address: _____

Contractor: _____ Telephone: _____

Address: _____

PROPERTY IDENTIFICATION:

Address: Between _____ and _____

Current Zoning: _____

Current Use: _____

Intended Use: _____

Name of Business (if applicable): _____

DESCRIPTION OF PROPOSED SIGN:

Before completing this portion of the application, review the sign ordinance in order to meet the requirements for the specific type of sign desired and zoning districts in which the property is located. A scale drawing at 1/4" = 1' of the sign as it is intended to be placed on the building or off-premises is required. A photograph of the building frontage or the property showing where the sign will be located shall also be furnished with this application.

Type of Sign (See 151.147-151.152): _____

Placement of Sign: On-Premises: _____

Off Premises: _____

Sign Materials: _____

Sign Size: _____ Sign Area: _____ Sign Weight: _____

Building Face parallel to Street: _____ ft. x 1.5 ft/or 1.0 sq. ft. = _____ sq. ft.

Type of Illumination (See 3.3 and 5.7): _____

APPLICANT'S STATEMENT:

I hereby state that the information that I have provided in this application is true and correct to the best of my knowledge. I also acknowledge receipt of the sign ordinance portion of the Manchester City Code.

Applicant's Signature: _____ Date: _____

Owner or Authorized Agent: _____ Date: _____

For Office Use Only:

\$50.00 Fee Paid Date Paid: _____ Received by: _____

Sign Scale Drawing Attached Photograph of Location Attached

Permit Number: _____

Planning Commission Findings: _____

Action: _____ Date: _____ Chair: _____

Sign Officer Findings: _____

_____ Final

Inspection Approval Date: _____

By: _____

Maintenance Record: