

SIGN PERMIT APPLICATION CITY OF BELLE PLAINE

218 North Meridian Street
P.O. Box 129
Belle Plaine MN 56011
952-873-5553 FAX 952-873-5509

Temporary Sign	\$20.00
Permanent Sign	\$40.00
Paid	_____
Receipt	_____
Date	_____
By:	_____

APPLICANT:

Name: _____ Telephone: _____

Address: _____

Business Name: _____

Business Address: _____

Business Phone: _____ Business Fax: _____

Zoning District: _____

Sign Location: _____

SIGN DIMENSIONS:

Width: _____ Depth: _____ Number of faces: _____

** Height of Sign: _____ (feet) ****Measured from ground level to top of sign.**

If attached to building, Building Dimensions:

Height: _____ Width: _____ Depth: _____

Does Sign Project Out From Building: ___ No ___ Yes-the distance: _____

Sign Illumination: ___ No ___ Yes

Yard Location: Front: _____ Side: _____ Rear: _____

This application must be accompanied by a site plan showing the location of the sign on the site and distance to property lines and a sketch of the sign showing any illustration or written messages to be printed on the sign. If sign requires footings, a building permit must be obtained.

Applicant Signature: _____ Date: _____

FOR OFFICE USE ONLY

Permit Fee Schedule:

Permit Fee: \$ _____

Variance Fee: \$ _____

Penalty: \$ _____

Other: \$ _____

Date Paid: _____

Permit : _____ Approved Date: _____

_____ Denied

Total Permit Fee: \$ _____

Authorized By: _____