

Plan Review Fee \$ _____ Paid _____ Date _____

OFFICE USE ONLY

Parcel ID # 13-____-____-_____

Certificate of Compliance _____

SIGN PERMIT APPLICATION

City of Warren

DIVISION OF BUILDINGS AND SAFETY ENGINEERING

One City Square, Building Department Ste 305, Warren, Michigan 48093-2391 Phone 586-574-4504

One sign per application

Property Address: _____ Zoning District: _____

Sign Fees

A \$40 Plan Review Fee is required for all signs other than Temporary Signs - Temporary Signs Fee \$95
Permit Fees for Signs 20 square feet or less \$100 – for Signs greater than 20 square feet \$250

NEW or EXISTING

WALL SIGN

GROUND SIGN

TEMPORARY SIGN

(Maximum 32 square feet)

Height _____

Width _____

Total Area _____

Under Clearance _____

Overall Height _____

Is Sign Illuminated?

YES NO

Electrical Connections By:

ZBA Approval _____

Sign Contractor _____

Company _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____

Email _____ prefer email communication

Are there other signs on the property? YES NO

If yes, describe type, dimensions and indicate if it will be removed (include pictures of elevations)

The undersigned hereby declare(s) the contents of this application are true to the best of my knowledge, information and belief.

Signature: _____ Date _____

Note: Three sets of plans and one electronic set of plans in pdf format showing construction of sign must accompany this application.

APPROVED BY: _____

Total Fee \$ _____