

# Springfield Township SIGN PERMIT APPLICATION

Submit application and plans to Code Enforcement Services. Please allow a ten (10) day plan review period. The application MUST include 3 sets of scaled drawings of the sign, indicating the dimensions and scale for both the sign and all symbols or lettering in the sign along with the scale of the building dimensions. The application must also include a scaled drawing showing the sign location and the location and size of any other ground or building signs on the property.

## **SIGN LOCATION:**

Parcel # of Property sign will be placed on: \_\_\_\_\_

Address of Property sign will be placed on: \_\_\_\_\_

## **APPLICANT INFO:**

Name: (print): \_\_\_\_\_

Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Zip: \_\_\_\_\_

License #: \_\_\_\_\_ Exp. Date \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax#: \_\_\_\_\_

Email: \_\_\_\_\_

## **OWNER INFO:**

Name (print): \_\_\_\_\_

Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Email: \_\_\_\_\_

**DESCRIPTION OF SIGN:**

Include size, height, style and construction material: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WORDING ON SIGN:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WILL THE SIGN BE ILLUMINATED:** YES \_\_\_\_\_ or NO \_\_\_\_\_

Estimated Cost of Sign: \$ \_\_\_\_\_ Fees: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant \_\_\_\_\_ Print Name \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\*\*\*OFFICE USE ONLY\*\*\*\*\***

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Planning Department

\_\_\_\_\_  
Date: \_\_\_\_\_

Building Department

Date Issued: \_\_\_\_\_ Permit #: \_\_\_\_\_

**\*\* FEES \*\* Without Electric = \$50.00 \*\* With Electric = \$100.00 \*\***

Code Enforcement Services  
6401 Citation Dr.  
Suite E  
Clarkston, MI 48346  
Phone: 248-625-8480 Fax: 248-625-8455