



City of Adrian
Building/Inspection Department
135 E. Maumee St., Adrian, MI 49221
(517) 264-4814
inspections@adrianmi.gov

FOR OFFICE USE ONLY	
Paid	_____
Permit #PS	_____
Source	_____

SIGN PERMIT APPLICATION

I. SITE ADDRESS/ LOCATION

Address:	Name of Business:	Is this a new business? () Yes () No
Business Owner/Agent Name:		Phone Number ()

II. APPLICANT INFORMATION

Applicant is: () Sign Contractor () Owner () Other _____

Name: _____ Phone Number _____

Address: _____ City _____ State _____ Zip _____

Contact Person _____ Phone Number _____

Federal ID Number (or reason for exemption) _____

E-mail address(s): _____

III. PLAN REVIEW: THE FOLLOWING INFORMATION IS REQUIRED FOR REVIEW

Zoning District: () B-1 () B-2 () **B-3 *** () B-4 () OS-1 () E1, I-1, I-2 () ERO () Residential

***B-3 Downtown Central Business District** proposed signage is subject to the rules and regulations of Article XXX, Section 30.00 – *Signs of the Zoning/Development Regulations* and Section 30.60 C, Sign Review (iii)(a-g). A sign permit must be obtained prior to the construction or installation of any signage. All signs within the Central Business District must be approved by the Downtown Development Authority **prior to** sign permit being issued. Please allow a few extra weeks for this process.

1st Sign: () New Installation () Replacement Sign () Temporary Sign () Relocation () Repair

Type: () Wall Sign () Projection () Awning/Canopy () Banner () Pole Sign () Other

Sign Materials: _____

Sign to Read: _____ Sign Location: _____

Sign Dimensions: () 1-sided () 2-sided Width _____ Height _____ Depth _____

Total Sq. Ft: _____ Distance from ground to bottom of sign _____ Pole Sign overall height _____

Is sign illuminated electrically? () Yes () No

Has electrical permit application been submitted for this sign? () Yes () No () Not required

Note: All electrical work shall be installed in accordance with the State Electrical Code by a Licensed Electrical Contractor or Electrical Sign Contractor. Electrical work shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the Electrical Inspector. The electrical permit applicant assumes the responsibility to arrange for necessary inspections.

2nd Sign: () New Installation () Replacement Sign () Temporary Sign () Relocation () Repair

Type: () Wall Sign () Projection () Awning/Canopy () Banner () Pole Sign () Other

Sign Materials: _____

Sign to Read: _____ Sign Location: _____

Sign Dimensions: () 1-sided () 2-sided Width _____ Height _____ Depth _____

Total Sq. Ft: _____ Distance from ground to bottom of sign _____ Pole Sign overall height _____

Is sign illuminated electrically? () Yes () No

Has electrical permit application been submitted for this sign? () Yes () No () Not required

(If submitting more than two signs, please attach additional application)

IV. RENDERING OF PROPOSED SIGNAGE-

Please submit a detailed colored drawing, photo, or illustration of the proposed signage indicating size, height, content, color, structural character, method and extent of illumination, and material to be used in construction. Also, include a sketch or architectural rendering showing the structure elevation, including the proposed sign location(s) and any other significant architectural elements.

Additional Description:

PERMIT FEE TABLE				
Sign Area	Fee	#Items	Total	<u>INSTRUCTIONS FOR COMPLETING PERMIT FEE TABLE</u> FEE CHART – Enter the number of items installed, multiply by the unit price for total, add total column for total fee. GENERAL: -Signage and Electrical work shall not be started until the application for permit has been filed and permit issued. EXPIRATION OF PERMIT: A permit shall become invalid if the authorized work is not commenced within six months after issuance of the permit or if the authorized work is suspended or abandoned for a period of six months after the time of commencing the work.
Up to 50 square feet	\$50.00			
51 to 100 square feet	\$100.00			
101 square feet and greater	\$200.00			
Temporary Sign	\$25.00			
TOTAL FEES				
Make checks payable to: “City of Adrian”				

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner/tenant to make application as his/her authorized agent, and we agree to conform to the applicable laws of the City of Adrian and the State of Michigan. All information on this application is accurate tot the best of my knowledge.

Applicants Signature

Date

Staff Comments/recommendations:

Disposition by City of Adrian Downtown Sign Committee

Approved: _____

Disapproved: _____

Approved as Modified: _____

Date: _____

Building/Inspection Department:

Approved: _____

Disapproved: _____

Zoning Administrator approval: _____

Date: _____