

City of Spicer  
PO BOX 656, SPICER, MN 56288  
320.796.5562 | www.cityofspicer.com

## APPLICATION FOR SIGN PERMIT



For City Use Only

SIGN PERMIT #	SI- _____
DATE RECEIVED	_____
DATE PAID	_____
PARCEL ID #	_____
PERMIT FEE	\$ _____

Indicate type of Sign:  Permanent Sign

Temporary Sign

Site Address of Sign: \_\_\_\_\_

Sign Height: \_\_\_\_\_

Sign Width: \_\_\_\_\_

Cost of Sign: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Phone # \_\_\_\_\_

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

Contractor Name: \_\_\_\_\_

License #: \_\_\_\_\_

Contractor's Address: \_\_\_\_\_

Contractor's Phone #: \_\_\_\_\_

Contractor's Email: \_\_\_\_\_

Excavation Contractor (if used): \_\_\_\_\_

License #: \_\_\_\_\_

Telephone #: \_\_\_\_\_

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

**Excavation Contractor must call GOPHER STATE ONE CALL 1-800-252-1166 at least 48 hours before beginning any excavation. (MN statute CH216D)**

Electrician (if used): \_\_\_\_\_

License #: \_\_\_\_\_

Telephone #: \_\_\_\_\_

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

Estimated Cost of Sign Construction: \_\_\_\_\_

**APPLICANT'S CERTIFICATIONS AND COMPLIANCE:** I hereby certify that I have completed, read and examined this application and know the same to be true and correct. I accept responsibility for compliance with all applicable laws and city provision, including those noted on the city zoning review, survey, plan review notes, and representation or lack of representation of setbacks, easements and property lines. Issuance of this permit does not authorize violation or cancellation of any state or local law regulating construction or the performance of

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

**DESCRIBE AND SKETCH THE SIGN YOU WISH TO CONSTRUCT, INCLUDING PROPERTY SET BACK MEASUREMENTS, HEIGHT & WIDTH OF THE SIGN, AND ITS PROPOSED LOCATION ON THE PROPERTY (Use the back of this application, or attach a separate drawing)**

City Approval

Bldg Official or Zoning Administrator Signature: \_\_\_\_\_

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

Comments or Conditions: \_\_\_\_\_