

SIGN APPROVAL

FOR CITY USE ONLY:

Permit # _____

Issue Date: _____



APPLICATION FOR SIGN

Business Tenant _____
 Property Owner _____
 Address _____
 Phone/Fax _____
 E-Mail Address _____

Contractor Name _____
 Contact Person _____
 Address _____
 Phone/Fax _____
 E-Mail Address _____

Sign Location Address (if different from above) _____

SUBMITTAL REQUIREMENTS (A SEPARATE PERMIT IS REQUIRED FOR EACH SIGN):

1. Site plan showing sign location including required setbacks or location of sign on building for an attached sign (3 copies)
2. Colored rendering or illustration of sign with dimensions (3 copies)
3. Footing details for a ground mounted sign or mounting details for a sign attached to the building (3 copies)
4. \$100 (additional fees may be required for signs over \$16,000) **FOR ADDITIONAL INFORMATION SEE www.marylandheights.com/signcode**

ESTIMATED PROJECT VALUE \$ _____

ILLUMINATED: St. Louis County Electrical Permit Number Required _____ **NOT ILLUMINATED**

ATTACHED SIGN

Wall Area: _____ Height X _____ Width (Leased Frontage) = _____ Square Feet
 Sign Area: _____ Height X _____ Width = _____ Square Feet
 Percentage of Wall Area: _____ %

AWNING SIGN

Awning Perimeter: _____ Square Feet Lettering: _____ Square Feet
 Percentage of Awning Perimeter: _____ %
 Letter Height: _____ Inches Logo: _____ Square Feet

GROUND MOUNTED SIGN

Sign Area: _____ Height X _____ Width = _____ Square Feet Overall Height: _____

SIGN INFORMATION

I hereby certify that the information contained in this application and accompanying plans is correct, and that I will conform to all applicable laws of the City of Maryland Heights. I also understand that it is my responsibility to make sure that I comply with all individual subdivision indentures.

APPLICANT ACCEPTANCE _____ DATE _____

I hereby authorize the above named applicant and/or contractor to install this sign at the location address listed on this application.

OWNER ACCEPTANCE _____ DATE _____

ACCEPTANCE

City Planner _____ Date _____
 Building Commissioner/ Plan Reviewer _____ Date _____

FOOTING Inspector _____ Date _____
 FINAL Inspector _____ Date _____

APPROVALS