



SIGN PERMIT APPLICATION

In accordance with Section 14.07 of the Zoning Ordinance

Highland Township Planning Dept.
205 N. John St.
Highland, MI 48357
(248) 887-3791 ext. 2

1) Sign Location:

Address: _____ Zip: _____

Parcel #: ____ - ____ - ____ - ____ Current Zoning: _____

2) Business Owner:

Name: _____

Mailing Address: _____ Zip: _____

Phone: _____ Email: _____

3) Property/Building Owner:

Name: _____

Mailing Address: _____ Zip: _____

Phone: _____ Email: _____

4) Contractor (Installer): (Include copies of all contractor's licenses including driver's license)

Name: _____

Mailing Address: _____ Zip: _____

Phone: _____ Email: _____

Federal Employer I.C. Number (contractor only) or reason for exemption _____

Workmen's Comp. Ins. Carrier (contractor only) or reason for exemption _____

MESC Employer Number, or reason for exemption _____

5) Type of Sign: (check all that apply)

Freestanding Wall Mounted Changeable Copy Directional Other: _____

Temporary – Proposed Dates: from _____ to _____

6) Two (2) Site Plans (if not wall-mounted) (must be to scale and include the following)

- a) Distance from sign to property lines and road right-of-way
- b) Location of utilities
- c) Existing structures, landscaping, and parking areas

7) Two (2) sets of Sign drawings and specifications (must be to scale and include the following)

- a) Sign Height: (from grade to top of sign)
- b) Sign dimensions (Vertical, Horizontal, and Total area)
- c) Sign type: (Wood, Plastic, Lighted, Metal, Channel, etc.)
- d) Elevation Drawing of Sign and wall face (including text and drawn to scale)
- e) Describe or include photos of all other signs located on the property

8) Other Applicable Permits: Yes _____ No _____ (Check one)

Electrical permit with UL number (UL # must be provided prior to final inspection) # _____

9) Value of Sign: \$ _____

10) Property Owner Acknowledgement and Signature:

I, the undersigned, as the property owner, state that I have given permission for the applicant to apply for a sign permit at the address above noted as location of sign.

SIGNATURE: _____

PRINT NAME: _____

On the ____ day of _____, _____ before me, a Notary Public, personally appeared the above named person whose signature appears above, and who executed the foregoing instrument, and he/she acknowledged to me that he/she executed the same.

Notary Stamp, Seal

State Of Michigan, County Of Oakland

Notary Public Signature: _____

11) Applicant Acknowledgement and Signature:

I, the undersigned, state that the foregoing answers contained herein, and the information submitted herewith, are in all respects true and correct to the best of my knowledge and belief.

SIGNATURE: _____

PRINT NAME: _____

FOR OFFICE USE ONLY

Date Received: (date stamp here)

Permit # _____