



## APPLICATION FOR SIGN PERMIT

APPLICATION NO.: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_ APPROVED DATE: \_\_\_\_\_

### TO BE COMPLETED BY APPLICANT

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

Address: \_\_\_\_\_ ZIP: \_\_\_\_\_

Address of Proposed Sign: \_\_\_\_\_

Structural Type: \_\_\_\_\_ Functional Type: \_\_\_\_\_

Mounting Type: (SELECT ONE: AWNING GROUND POLE WALL PROJECTING CANOPY )

Purpose: (SELECT ONE: ADVERTISING BUSINESS CONSTRUCTION ID)

Type of Material to be Used for Construction: \_\_\_\_\_

Height of Sign: \_\_\_\_\_ Gross Area: \_\_\_\_\_ Estimated Cost: \_\_\_\_\_

I certify that I am the (SELECT ONE: OWNER LESSEE TENANT) of the property for which this application is made. I understand that I must submit a site plan, information, a sketch, and the REQUIRED FEE OF \$25.00, before the application will be accepted for consideration. I also understand that the Zoning Administrator must approve or deny my application within 30 days unless I consent to an extension of time.

A zoning certificate shall become invalid six (6) months after the date on which it is issued, unless during such six-month period construction has commenced. It shall also become invalid if such construction is incomplete, terminated, or abandoned six (6) months after work has commenced.

Except in case of emergency, permit applications must be submitted not less than three (3) business days in advance for review and processing. The Zoning Administrator reserves the right to issue or deny any permit within 30 days of application, in accordance with City Zoning Regulations. No work shall commence until a signed permit has been received by the applicant. Permit must be present at the jobsite and available for viewing by City Staff. Except in case of emergency, inspections must be conducted during normal business hours.

**IT IS THE RESPONSIBILITY OF THE PERMIT HOLDER** to contact the office of the Zoning Administrator at least two (2) **in advance** for all required inspections. Permit Holder or representative must be on-site for all required inspections.

**SITE SKETCH AND DIAGRAM OR PICTURE OF SIGN MUST BE ATTACHED TO THIS APPLICATION.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*Call before you dig!! (800)344-7233 (DIG-SAFE) or 811, or <https://www.kansas811.com>\*\***