

Town of Munster SIGN PERMIT APPLICATION

Community Development ~ Building, Zoning & Code Enforcement ~ 1005 Ridge Rd. ~ Munster, IN 46321
Phone 219-836-6990 ~ Fax 836-6542 ~ Email @ communitydevelopment@munster.org

TYPE OR PRINT IN INK

PERMIT #: _____

The undersigned certifies that the owner of record authorizes the proposed work and that the undersigned has be authorized by the owner to make this application as the authorized agent and agrees to conform to all applicable laws of this jurisdiction.

Authorized Signature: X _____ Date: _____

Applicant's Title: _____ Email: _____

Display Address: _____ on the N / S / E / W side of the street or cul-de-sac

Business Name: _____ Phone #: _____

Owner/Operator's Name: _____ Email: _____

Office Address (if different from above): _____

PROPOSED PROJECT

_____ *New Sign* _____ *Reface* _____ *Relocation*

_____ *Wall* _____ *Logo* _____ *Channel Letter* _____ *Raceway* _____ *Monument*

_____ *Blade* _____ *Projecting* _____ *Awning* _____ *Window* _____ *Directory* _____ *Other*

Description: _____

DETAILS

Dimensions: _____ (height) X _____ (width) *Total area of Proposed Sign(s):* _____ s.f.

of Existing Signs to Remain on site: _____ *Total area of Remaining Sign(s):* _____ s.f.

Illumination: _____ *Internal* _____ *External* _____ *Backlit* _____ *Non-Illuminated*

Electric: _____ *Existing* _____ *New Circuit* *Freestanding Sign distance from Right-of-Way:* _____ (10' min)

Building: _____ *Single Tenant* _____ *Internally Accessed Multi-Tenant* _____ *Externally Accessed Multi-Tenant*

Total square footage of interior retail or business floor space, excluding storage areas: _____

TOTAL ESTIMATED COST OF PROJECT: \$ _____

SUBMITTAL REQUIREMENTS ~ WHEN APPLICABLE

- Detailed dimensional drawings or photos of sign(s)
- Installation specifications
- Photo of building/tenant space elevation showing location of sign(s)
- Detailed dimensional site plan showing location of monument/ground sign(s)
- Landscape plan for monument/ground sign(s)

~ PLEASE PROVIDE CONTRACTOR INFORMATION ON Pg. 2 ~

PERMIT FEE: \$ _____ **INSPECTION FEE: \$** _____ **TOTAL FEE DUE: \$** _____

~ PLEASE SCHEDULE INSPECTIONS 24 HOURS IN ADVANCE ~

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SIGN PERMIT APPLICATION

Sign Contractor: _____ Contact Name: _____

Address: _____ Phone #: _____

_____ Email: _____

Electrical Contractor: _____ Contact Name: _____

Address: _____ Phone #: _____

_____ Email: _____

Landscape Contractor: _____ Contact Name: _____

Address: _____ Phone #: _____

_____ Email: _____

Planning: (Approved / Denied) _____ Title: _____ Date: _____

Building: (Approved / Denied) _____ Title: _____ Date: _____

Zoning Enforcement Review Notes: