



132 East Broad Street • P.O. Box 507 • Linden, Michigan 48451-0507  
Telephone: (810) 735-7980 • Fax: (810) 735-4793

# SIGN PERMIT APPLICATION

## Permanent Signs (Includes A-Frame Signs)

SECTION TO BE FILLED OUT BY APPLICANT

Property Address: \_\_\_\_\_  
Property Tax #: \_\_\_\_\_  
Property Owner: \_\_\_\_\_

Zoning District: \_\_\_\_\_  
Historic District: yes \_\_\_\_\_ no \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Business' Name: \_\_\_\_\_

Sign Type: \_\_\_\_\_ Sign Size: \_\_\_\_\_

Sign Location/Mounting: \_\_\_\_\_

Type of Mounting: \_\_\_\_\_

Sign Materials: \_\_\_\_\_

Name of Sign Contractor: \_\_\_\_\_

This sign permit application and any supporting documents must be submitted and all fees paid at least 8 days prior to the next regularly scheduled Sign Review Committee meeting. The Sign Review Committee meets on an as needed basis each Thursday at 8:15am.

The application for sign permit must be accompanied by the supporting information as outlined in Section 9.8.2 of the City of Linden Zoning Ordinance, including a sign sketch showing the colors, fonts, captions, materials, method of illumination (if any), and estimated sign costs.

**Sign Permit Application Fee: \$50**  
**Certificate of Appropriateness Application Fee (for signs located in the historic district): \$50**

If located in the historic district, a Certificate of Appropriateness will first need to be obtained from the Historic District Commission for the proposed sign. A separate Certificate of Appropriateness application form will need to be submitted to the City.

### INCOMPLETE SUBMITTALS WILL NOT BE ACCEPTED

I certify that the information given herein is true and correct to the best of my knowledge:

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

THIS SECTION FOR CITY USE ONLY

Fee Paid: \_\_\_\_\_ Date: \_\_\_\_\_

Sign Committee Review: \_\_\_\_\_ approved \_\_\_\_\_ denied \_\_\_\_\_ referred to Planning Commission

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

Final Inspection: \_\_\_\_\_ Date: \_\_\_\_\_