

NILES CHARTER TOWNSHIP SIGN PERMIT APPLICATION

Applicant Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number(s): _____ E-mail: _____

I hereby attest that all information on this application is, to the best of my knowledge, true and accurate.

Signature: _____ **Date:** _____

I hereby grant permission for Niles Charter Township staff to enter the property described above for the purpose of gathering information related to this application. (Note to applicant: This is optional and will not affect any decision on your application)

Signature: _____ **Date:** _____

Applicant is the: Owner Lessee Optionee Contractor/Architect

Property Owner's Name (if different from applicant): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number(s): _____ E-mail: _____

Project Location or Address: _____

Property is: Residential Commercial Industrial **Property zoned:** _____

| | | | | | |
|------------------------|------------|------------|--------------|--------------|------------------|
| Existing Signs: | Wall Signs | Pole Signs | Ground Signs | Canopy Signs | Projecting Signs |
| Number: | _____ | _____ | _____ | _____ | _____ |
| Size(s): | _____ | _____ | _____ | _____ | _____ |

| | | | | | |
|------------------------|------------|------------|--------------|--------------|------------------|
| Proposed Signs: | Wall Signs | Pole Signs | Ground Signs | Canopy Signs | Projecting Signs |
| Number: | _____ | _____ | _____ | _____ | _____ |
| Size(s): | _____ | _____ | _____ | _____ | _____ |

Proposed sign(s) is: Temporary Permanent: Date sign to be removed: _____

Total Square Footage of all Signage: _____

****Plot Plan Requirement:** You must provide a plot plan showing the design and layout of the proposed sign(s) as well as the location of the sign(s) in relation to existing structures/buildings, drives, property lines, and existing signage. For your convenience, graph lines have been provided on the back of this application, or the plot plan can be attached to the application.

TO BE COMPLETED BY TOWNSHIP

Date application and fee received: _____ Staff Initials: _____ Receipt #: _____

Approved: Yes No Electrical Permit Required: Yes No

Zoning Administrator (Printed Name) _____ **Signature** _____ **Date** _____

Plot Plan

(Remember to show streets, all structures, easements, driveways, existing signage & property lines)

