



City of Owosso Building Department
 301 W Main St. Owosso, MI 48867
 Phone: 989-725-0535
 Email: building@ci.owosso.mi.us

SIGN PERMIT APPLICATION

1. PROPERTY ADDRESS:	
2. ZONING DISTRICT:	
3. HISTORICAL DISTRICT? If YES, submit the Historical District Commission (HDC) Application for a Certificate of Appropriateness	
4. PROPERTY OWNER INFORMATION:	
Name:	Address:
Phone Number:	Email:
Signature:	Date:
5. BUSINESS OWNER INFORMATION: (if different than property owner)	
Name:	Address:
Phone Number:	Email:
Signature:	Date:
6. CONTRACTOR INFORMATION:	
Name:	Company Name:
Address:	
Phone Number:	Email:
License Number:	Expiration date:
Signature:	Date:
<i>The provisions regulating signage are provided in Chapter 38 - City of Owosso Zoning Ordinance, Article XX Signs. By signing, the contractor agrees to perform the described work in accordance with all applicable sections of the City of Owosso Code of Ordinances. Signer will insure that all inspection requests are made a minimum of 24 hours prior to the requested time.</i>	

7. SIGN INFORMATION:		
<input type="checkbox"/> Awning <input type="checkbox"/> Ground <input type="checkbox"/> Wall <input type="checkbox"/> Pole <input type="checkbox"/> Projecting	<input type="checkbox"/> Temporary <input type="checkbox"/> Temporary dates displayed:	Height: Width: Depth: Square footage: (over 40 sf, requires Building Official review)
Pole sign ground clearance:		Ground/pole # of sides:

Sign material:	<input type="checkbox"/> Metal	<input type="checkbox"/> Plastic	<input type="checkbox"/> Wood
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<input type="checkbox"/> Painted	<input type="checkbox"/> Color	
Lighting source: internal or external	Number of fixtures:	
Type of lighting:	Height from grade: (if applicable)	
<input type="checkbox"/> Include Sign location and setbacks for ground/pole sign	<input type="checkbox"/> Include image of sign on building	
<input type="checkbox"/> Include copy of sign artwork		
SIGN PERMIT FEE		
Base fee \$40	Square footage of sign at \$0.60 per sq. ft.	Total fee:
OFFICE USE ONLY		
Date received:	Approved/Denied	Permit #
Signature:		Date: