	UNIFORM SIGN PERMIT APPLICATION Trown Tivillage Ticity Project Location						PERMIT NO. TAX KEY #			
ISSUING	TOWN VILLAGE	PROJECT LOCATION (Bullding Address)								
MUNICIPALITY	OF		PROJECT DESCRIPTION			COMME	MERCIAL RESIDENTIAL			
Owner's Name	<u> </u>	Mailing Ado	Mailing Address				Telephone - Include Area Code			
Contractor's Name Mailing Address Telephone - Include Area Code								clude Area Code		
SITE	1/4,1/4, SECTION				, <u>T</u>	N,RE(or)W				
Lot: Average Wldth	Subdivision Name				Lot No.	Block No.				
Zoning District	Setbacks N.S.E.W.		Front Rear Ft. Ft.		Left	Right Ft. Ft.				
1. PROJECT	3. TYPE	4. USE		7. SIGN TY	PE		10. PRESENT (JSE OR OCCUPANCY		
New Repal Alteration Raze Addition Move			□ Wall □ Ground □ Projecting □ Roof □ Pole □ Other							
2. AREA - SIGN FACE	5. HEIGHT		8. ILLUMINATED			EXISTING SIGNS				
1st Side	☐ Internally☐ Externally 9. ESTIMATED COS		ly :		Total Sq. Ft					
2nd Side	TOTAL\$			•						
Other	Sq. Ft.	6. SHORELAND/FLOODLAND								
TOTAL	TALSq. Ft.				Shore setbackfeet from sign to ordinary high water mark. Floodplain setbackfeet from sign to 100 year floodplain.					
		Fioodpia	EXISTING SIGN							
TYPE OF MATERIAL		Šign 1 Size: Width								
│ □ Wood □ Me │ □ Plastic □ Ca				oack Offset						
			Sign 2 Size: WidthSetback							
PLAT OF SURVEY INCLUDING THE FOLLOWING INFORMATION: Setback Offset										
1) Location and dimensions of Lot. 2) Location and dimensions of all existing and proposed buildings on the Lot. 3) Location, centerline and grade of all abutting streets. 4) Floor elevation of propsed new buildings. 5) High water line of any water body which Lot abutts. 6) Location of any existing or proposed wells, septic systems, public sewer or water mains on the Lot. 7) Location of any proposal and existing signs.										
The applicant agrees to comply with the Municipal Ordinances and with the conditions of this permit; understands that the Issuance of the permit created no legal liability, express or implied, of the Department, Municipality, Agency or Inspector; and certifies that all the above information is accurate. SIGNATURE OF APPLICANT DATE										
CONDITIONS OF APPROVAL This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. Have Permit/Application number and address when requesting inspections. Call 1-800-422-5220. Give at least 24 hours notice.										
PERMIT ISSUED BY MUNICIPAL AGENT:										
FEES:	PERMIT(S) REQU	IRED EXPIRA		ATION;		FICIAILI 1990				
Pian Review Fee Inspection Fee Administration Fee	—— HVAC	tw do ur	two years date issue unless other		Name			:		
Other	no			Date Certification No						
Total				(Clark/Annon		Gold - Applicant		

White - Municipal Files

Yellow - IIL Office

Pink - Clerk/Assessor

Gold - Applicant