



Sign Application

Permit # _____

Submit Applications to: Permits@rumrivercc.com Scheduling: 763-331-7722

This Application becomes a *Numbered Permit* after the review is complete and payment of fees.

Work is **not** to begin prior to issuance. **All** information is required and **must** be completed.

Site Address	Property ID #							
Property Owner Nan	ne							
Address			City			State	_ Zip	
Phone #		Email						
Applicant: Contr	ractor <u>OR</u>	Owner ~ Is this r	ental property?	Yes	No ~	Commercial	Residential	
Applicant Name								
Address						State	Zip	
Phone #		Email						
		Туре	e of Sign (Check al	l that app	<u>ly):</u>			
New	Alteration	Free Standi	ng Wall N	lounted	III	uminated	Non-Illuminated	
	Size of Sig	<u>n:</u> *If a free standir	ng sign, include a s	ite plan w	ith location	specified		
*Length: _	F	T Width:	Height:		_ Total A	rea:	_ Sq Ft	
		sign, please provide						
*Length: _	F	T Width:	Height:		Total Are	a:	Sq Ft	
	f sign; include d site plan sh hat will rema ges the above info	e materials, lettering owing sign location, in: Total Sq Ft of all	existing signs	npliance with	Sq Ft & prov all applicable la	vide a diagram	the ruling jurisdiction.	
Printed Name								
		*(Office Use Only	<u>y</u> *				
Approvals:	Date	all required informa	tion was received:			_		
			Date			Permit Fee \$		
Zoning Date								
Payment info:					Su	rcharge Fee \$		
Payment received	by							
		Last 4 CC #						
Receipt #:		Da	ate					