

**CITY OF BETHEL HEIGHTS
SIGN APPLICATION**

DATE: ___/___/___ APPLICANT: _____ PHONE: _____

COMPANY NAME: _____

ADDRESS: _____ PHONE: _____

PROPERTY OWNER: _____ PHONE: _____

ADDRESS OF SIGN: _____ SIDE OF STREET: N S E W

NUMBER OR NAME OF NEAREST STREET INTERSECTION: _____

DIRECTION FROM INTERSECTION: N S E W DISTANCE FROM INTERSECTION: _____ FT.

DESCRIPTION OF SIGN:

TYPE OF SIGN: BUSINESS () OUTDOOR ADVERT () PORTABLE () TEMPORARY ()

OTHER () IF OTHER EXPLAIN: _____

* ATTACH BLUEPRINT OR DRAWING TO APPLICATION

* ATTACH ELECTRIC PERMIT FOR ILLUMINATED SIGNS

TYPE OF CONSTRUCTION:

FREE STANDING: () PROJECTING () ROOF () WALL () OTHER ()

IF OTHER, EXPLAIN: _____

DIMENSIONS:

HEIGHTS OF SIGN: _____ FT. WIDTH OF SIGN: _____ FT.

ARRAIGNMENT OF PANELS:

SINGLE PANEL () V PANELS () DOUBLE DECKED () SIDE BY SIDE: () BACK TO BACK ()

TOTAL NUMBER OF PANELS: _____ ILLUMINATED: YES () NO ()

CURRENT ZONING OF PROPERTY: A () B1 () B-2 () I () R-1 () R-2 () R-3 () R-MH ()

CONSENT OF PROPERTY OWNER: _____ PRINT NAME: _____

Signature

OFFICE USE ONLY: DATE FILED: ___ ___ ___ FEE PAID: \$20.00 _____

SIGN REVIEW – APPROVED () SITE INSPECTION – APPROVED ()

SIGN ORD. REVIEW - APPROVED ()

APPROVED BY: _____ DATE: _____