



Permanent Sign Permit Application

Submit Applications to City Hall

Street Address: 114 North Kidd Street Ionia, MI 48846

Mailing Address: P.O. Box 496 Ionia, MI 48846

Ph: (616) 527-4170 Website: www.ci.ionia.mi.us

Date of Application: _____

Permit Fee: See Below

Per Chapter 1234.18 of the City Code, a sign permit is required when erecting, structurally altering or maintaining, or relocating a sign. Additional building, electrical, or mechanical permits may be needed by the Ionia County Building Department.

Type of Sign (Check one):

___ Awning/Marque Sign \$35 Fee ___ Ground Sign \$45 Fee

___ Wall Sign \$35 Fee

Applicant Information

Applicant's Name: _____ Interest in Property: _____

Address: _____ City, State, Zip: _____

Phone: _____ Email: _____

Owner's Name (If different from above): _____

Project Information

1. Address of Property: _____

2. Parcel Number: _____

3. Legal Description: _____

4. Project Description: _____

5. Current Zoning: _____

6. Size of Parcel: _____

Signature

Applicant's Signature: _____ Date: _____

Property Owner's Signature: _____ Date: _____

Application Requirements

Items to be Submitted

The following materials must be submitted to the City Zoning Administrator in applying for a sign permit.

- ___ Application
- ___ Fee
- ___ Site Plan

Site Plan Guidelines

1. A site plan must be drawn to scale showing the location of the building, structure or lot upon which the sign is to be attached or erected and showing the proposed sign in relation to the buildings and structures along with setback from property lines.
2. Measurements must be shown for both the size of the proposed sign and the size of the wall on which the sign will be located.
3. Plans and specifications of the propose sign including the method of construction and attachment to structures or ground. Depending on the type and size of the sign, the City may require calculations showing that the sign structure is designed for dead load and wind pressure in any direction of not less than 30 points per square foot of area.

OFFICE USE ONLY	Date Received: _____
___ Fees Paid: _____	
Approved or Denied (Circle One)	
Comments: _____ _____	
Copies To: _____	
Signature: _____ Date: _____	