

**CITY OF KALISPELL**

**SIGN PERMIT APPLICATION**

PERMIT # \_\_\_\_\_

Submittal Requirements:

1. Site plan indicating location of each proposed sign, as well as the location & size (square feet) of each existing sign.
2. Dimensioned drawing of proposed signage including color, material, structural supports & electrical/lighting components.

Date: \_\_\_\_\_

Address of Sign: \_\_\_\_\_ Current Zoning \_\_\_\_\_

Business Name: \_\_\_\_\_ Owner: \_\_\_\_\_

Address of Owner: \_\_\_\_\_ Phone #: \_\_\_\_\_

PROPERTY DESCRIPTION

Legal: \_\_\_\_\_

Owner: \_\_\_\_\_

Street Frontage (Feet): \_\_\_\_\_ Building Frontage (Feet): \_\_\_\_\_

Architectural Review Committee Approval Required? \_\_\_\_\_ Date of Approval: \_\_\_\_\_

PROPOSED SIGNAGE

Sign Type – Wall, Free- standing, Billboard	Size per Face (sq.ft.)	# of faces	Height above Grade		Value of Sign	Notes	Office Use
			Low Point	High Point			

Total of Signs: \$ \_\_\_\_\_ Total Fee: \$ \_\_\_\_\_

Comments:


I HEREBY CERTIFY UNDER PENALTY OF PERJURY AND THE LAWS OF TH ESTATE OF MONTANA THAT THE INFORMATION SUBMITTED HEREIN AND ALL OTHER FORMS, DOCUMENTS, PLANS AND OTHER INFORMATION SUBMITTED AS PART OF THIS APPLICATION, TO BE TRUE, COMPLETE, AND ACCURATE TO THE BEST OF MY KNOWLEDGE. SHOULD ANY INFORMATION OF REPRESENTATION SUBMITTED IN CONNECTION WITH THIS APPLIATION BE INCORRECT OR UNTRUE, I UNDERSTAND THAT ANY PERMIT BASED THEREON MAY BE RECINDED, OR OTHER APPROPRIATE ACTION TAKEN.

Signed: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_

Method of Payment:   Cash: \_\_\_\_\_

                          Check #: \_\_\_\_\_

                          Receipt #: \_\_\_\_\_

Approved by: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_