



City of Champlin Phone: 763-923-7102
 19955 Champlin Drive Fax: 763-421-5256
 Champlin, MN 55316 www.ci.champlin.mn.us

Application for Sign Permit

TYPE OF SIGN PERMIT:

- Permanent Sign
- Temporary Sign – Dates: From _____ To _____

LOCATION OF SIGN:

Property Owner _____ Phone _____
 Address _____

APPLICANT INFORMATION:

Name of Sign Contractor _____ Phone _____
 Address _____
 Contact Person _____

PERMANENT SIGN INFORMATION

- Building-mounted
- Freestanding

Sign Message (Attach Renderings): _____

Sign Dimensions:

Length _____ Width _____ Square Feet _____

Sign Height _____

 Applicant Signature

 Property Owner/Building Owner Signature

* Any information set forth in this application that is false or misleading may result in the rejection of this application. A condition for permit issuance is that the proposed construction will comply at all times with the approved plans.

FOR OFFICE USE ONLY

Fee: _____

Approved: _____ Date: _____