



Office of Planning and Zoning
 420 N Front Street
 P O Box 395
 Suttons Bay, MI 49682
 231-271-3051
zoning@suttonsbayvillage.org

SIGN PERMIT APPLICATION

Application Fee \$50.00: Check _____ CC _____ Cash _____ Receipt # _____

Project Address _____

Parcel ID# 45-043- _____ - _____ - _____ Zoning District _____

Authorized Agents Name _____ Phone # _____

Address _____ Email _____

Business Owner's Name _____ Phone # _____

Address _____ Email _____

Property Owner Name _____ Phone # _____

Address _____ Email _____

PROPOSED SIGN(S)

Type and Dimension - width / length / height of Sign(s):

Freestanding _____ / _____ / _____ SQ. Ft. _____ Monument _____ / _____ / _____ SQ. Ft. _____

Projecting _____ / _____ / _____ SQ. Ft. _____ Wall _____ / _____ / _____ SQ. Ft. _____

Ground _____ / _____ / _____ SQ. Ft. _____ Awning/Canopy _____ / _____ / _____ SQ. Ft. _____

Dimensional setback from property line(s) _____ MDOT Permit(if applicable) Yes No

If applicable, type of external illumination _____

A site plan and elevation depicting the location and size of sign must be provided. (Please attach)

Signature of applicant _____ Date _____

Signature of property owner _____ Date _____

OFFICIAL USE ONLY: Date Received _____ Approved By _____