

CHARTER TOWNSHIP OF COMSTOCK

Street Address 6138 King Highway

Mailing Address: PO Box 449

Comstock, MI 49041-0449

Phone: (269) 381-2360 Fax: (269) 381-4328



SIGN PERMIT APPLICATION

PROPERTY ADDRESS: _____

Project Name: _____

Present Use of Property: _____

Applicant Name: _____

Address: _____

City/St/Zip: _____

Phone: _____

Fax: _____

E-mail Address: _____

Property Owner: _____

Address: _____

City/St/Zip: _____

E-mail Address: _____

Phone: _____

Parcel/Tax ID Number: 3907-_____-_____-_____

Zoning District: _____

REQUIRED INFORMATION FOR PERMANENT FREESTANDING SIGNS

- A scaled site plan showing placement of existing and proposed sign(s). Include location, height, setbacks from right-of-way and from nearest side property line.
- A scaled drawing/picture showing new sign structure and sign face(s) including all dimensions and total sign height.
- Any and all other pertinent information.

Please check below all that apply to the sign for which this permit is sought:

Type: ___ Pylon ___ Ground ___ Replacement face only

Purpose: ___ Multi-Tenant ID ___ Building ID ___ Subdivision ID

Freestanding Sign Details

Sign Area: _____ **Height above grade** _____

Frame/Structure Area: _____

Internal Illumination (y/n): _____ **External Illumination¹ (y/n):** _____

¹ provide fixture details

TOWNSHIP USE ONLY:

LOCATION/STREET ADDRESS: _____

ZONING COMPLIANCE PERMIT: _____

REQUIRED INFORMATION FOR PERMANENT WALL SIGNS

- A scaled elevation drawing showing placement of existing and proposed sign(s) including wall dimensions, window dimensions (for window signs) and sign height on wall.
- A scaled drawing/picture showing new sign/sign face(s) including all dimensions.
- Any and all other pertinent information.

| | |
|---|---|
| <u>Wall Sign Details</u> | |
| Purpose: _____ | Building ID _____ Tenant ID _____ |
| Sign Face Area: _____ | Height above grade¹: _____ |
| Linear feet of wall²: _____ | Window area (for window signs) _____ |
| Internal illumination (y/n): _____ | External illumination³ (y/n): _____ |

¹ the vertical distance measured from the highest point of the sign to the finished grade beneath the sign.
² to which sign will be attached. For individual tenants, indicate width of tenant space.
³ provide fixture details.

A separate Building and/or Electrical Permit may be required. Contact the Kalamazoo Area Building Authority at (269) 216-9511.

I (we) the undersigned certify that the information contained on this application form and the attachments hereto are to the best of my (our) knowledge true and accurate.

Signatures: Property Owner Signature: _____ Date: _____
 Applicant Signature: _____ Date: _____

| | | |
|------------------------------------|------------------------------------|---------------------|
| APPROVED _____ | APPROVED W/CONDITIONS _____ | DENIED _____ |
| CONDITIONS: _____ | | |
| _____ | | |
| _____ | | |
| ZONING ADMINISTRATOR: _____ | | |
| DATE: _____ | | |

| <u>Fee Schedule</u> | |
|--------------------------------|-----------------------|
| <u>Sign Type</u> | <u>Fee</u> |
| Permanent Freestanding Sign | \$100 per application |
| Permanent Wall Sign | \$75 per application |
| Replacement Face existing sign | \$50 per application |

| <u>Payment Received</u> |
|--------------------------------|
| Cash (____) Charge (____) |
| Check No.: _____ |
| Amount Paid: \$_____ |
| Date: _____ |