

**PERMIT FEE: \$50.00**

## PORTABLE SIGN PERMIT APPLICATION

Business Name	Business Address	
Property Owner's Name	Full Address	Phone
Contractor's Business Name	Full Address	Phone
Application Submitted by <i>(print clearly)</i>	Title	Phone Number(s)

Sign Placement @ Business and/or Location			Zoning district	
Street Frontage	Bldg Frontage	Existing Signage on the Property	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Location on Property (from Lot Lines)	Front _____	Rear _____	Side _____	Side _____

Sign Dimensions	Horizontal Length _____	Vertical Length _____	Thickness _____	Weight _____	
Material Type	Aluminum <input type="checkbox"/>	Metal <input type="checkbox"/>	Wood <input type="checkbox"/>	Plastic <input type="checkbox"/>	Other <input type="checkbox"/>
Anchor Material	Cable <input type="checkbox"/>	Stakes <input type="checkbox"/>	Steel <input type="checkbox"/>	Other <input type="checkbox"/>	

**ONE TIME USE PERMIT. SEPARATE PERMIT REQUIRED FOR EACH SIGN, EACH LOCATION.**

Portable Signs may only be displayed for 60 days per calendar year at any one business location.

**Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

Permits can be issued for terms of 15, 30 or 60 days. Subsequent permits shall not be issued until 30 days elapses after the 15 day permit expiration, and 60 days following a 30 day permit.

**Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

**Start Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

Portable signs must be secured against overturning and in compliance of 17.72 Signs Ordinance and requirements.

### SIGNATURE IS REQUIRED TO PROCESS APPLICATION

I have reviewed Signs Ordinance Chapter 17.72 and agree to construct said improvement in compliance with all provisions of said ordinance and all building zoning ordinances of the City of North Sioux City, and all amendments thereto.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**FOR OFFICE USE ONLY**

RECEIVED COPY:  Site Plan  Color Photo of Sign **\$50.00 FEE:** RECEIPT # \_\_\_\_\_ CHECK # \_\_\_\_\_  CASH

NOTES: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ DATE \_\_\_\_\_