

TEMPORARY SIGN PERMIT APPLICATION

**City of Frankenmuth
240 W. Genesee Street
Frankenmuth, MI 48734-1398
Phone: (989) 652-9901
Facsimile: (989) 652-3451**

Date _____ Permit No. _____

Name of Applicant _____ Phone No. _____
Address, City, State, Zip _____
_____ Zoning District _____

Location of sign if different than above: _____

Type of Sign: Land Development Project Portable-Changeable Letter Banner(s) "A" Frame
Other _____

Dimension of Sign _____ Single Face Double Face

Lighting: No Yes. Please describe type of lighting (i.e. internal, external illumination, etc.) _____

Most temporary signs are limited to twenty (20) days per calendar year and are limited to less than 32 s.f. in size. A permit is requested for _____ days, beginning:

- a. _____ and ending on _____.
- b. _____ and ending on _____.
- c. _____ and ending on _____.
- d. _____ and ending on _____.
- e. _____ and ending on _____.
- f. _____ and ending on _____.

You have applied for a Temporary Sign permit in accordance with the City of Frankenmuth's Temporary Sign Regulations (Section 5.166 of Article 17, Chapter 51 of Title V). Should the permit be issued to you, you are advised of the following responsibilities:

1. All temporary signs must be located behind the public right-of-way so that a vision obstruction is not created (please note: the right-of-way is usually located one (1) foot inside the address side of the sidewalk). **FLASHING LIGHTS ARE PROHIBITED!**
2. If the location of the proposed sign is within the Historic Preservation District, the Historic District Commission must approve this application prior to a permit being issued. This process usually takes up to ten (10) business days.
3. It is your responsibility to remove the sign from the premises on the day the permit expires.

If you have any questions, please contact the Zoning Administrator during regular business hours.

By signing below, I understand the above requirements and agree to comply with all applicable City Codes.

Applicant's Signature _____ Date _____

Make check payable to "City of Frankenmuth"

-Office Use Only-

Permit Fee \$ _____

Check all of the following which are applicable:

- Historic District Comm. Approved/Denied on _____.
- Zoning Board of Appeals Approved/Denied on _____.
- City Council Approved/Denied on _____.
- Building Inspector Approved/Denied on _____.

Zoning Administrator Approved/Denied: Signed _____ Dated _____

Payment: No Charge Invoice Cash Check No. _____ Date Rec'd: _____