

MANDAN ARCHITECTURAL REVIEW COMMISSION
APPLICATION FOR SIGNAGE
PHONE 667-3230 FAX 667-3481

APPLICATION INFORMATION:

- 1. Parcel Address: _____
- 2. Name of Property/Business Owner: _____
D/B/A: _____
Mailing Address: _____
Phone (Cell) _____ (Office) _____
- 3. Name of Sign Company (if applicable): _____
Mailing Address: _____
Phone (Cell) _____ (Office) _____

PERMANENT SIGN INFORMATION:

- 1. Description of Proposed Activity:
 - A. New Signage _____ Remove & Replace _____ Repair _____
 - B. Wall Mount _____ Pylon _____ Monument _____
 - Other _____
- 2. Estimated Cost of Project: _____

Applicants must present 10 copies of the following requested information to the Building Inspections Department **no later than Wednesday at 12 p.m. (noon)**, prior to the scheduled meeting at which consideration is desired.

- Pictures of the project and also surrounding areas.
- Site dimensions with locations.
- Materials, colors and background colors.
- Information regarding lighting and electronic message centers.
- Scaled drawings including sign dimensions and dimensions of supporting structures.

A sign permit is required through the Building Inspections Department after approval from this Commission. Cost of permit is \$45.00.

TEMPORARY/PORTABLE SIGN INFORMATION:

- 1. Date Registration Issued: _____
- 2. Date of Removal: _____

No permit or fee is required.

By signing this application, I acknowledge it is the responsibility of the owner and/or sign contractor to conform to ALL Federal, State and Local regulations and the Sign Policy guidelines.

Applicant: _____ Date: _____

*** FOR OFFICE USE ONLY ***

- 1. Current Zoning: _____
- 2. District: Core _____ Fringe _____ Gateway _____ None of the listed _____
- 3. Date Reviewed: _____
- 4. Approved/Denied: _____
- 5. Conditions of Approval/Denial: _____

Authorized Representative

Date