



Parcel No. \_\_\_\_\_

### City Of Mandan Application For Signage

Phone 667-3230 Fax 667-3481

#### Application Information:

1. Property 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) \_\_\_\_\_

#### 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 copies of the following requested information to the Building Inspections Department

- 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.

**Cost of permit is \$50.00.**

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: \_\_\_\_\_