



## SIGN PERMIT APPLICATION

Thornapple Township, 200 E. Main St., Middleville, MI 49333

Phone: 269-795-7202 Fax: 269-795-8812

Email: [zoning-administrator@thornapple-twp.org](mailto:zoning-administrator@thornapple-twp.org)

### Instructions

Please type or print in ink. A detailed sign drawing, showing all text and illustrations to appear on it, means of support, external light fixtures, and written physical dimensions thereof must be submitted with this form. Also, a site map showing the exact location of the sign in relation to adjacent streets, sidewalks, driveways, right-of-ways, other signs, buildings and other structures must be included. Attach additional pages as needed but do fill out this page in any case. A separate permit, demonstrating compliance with the Township Sign Ordinance, is required for each new or redesigned sign. You must contact MISS DIG if there will be any digging.

Address of Sign Location: \_\_\_\_\_

Permanent Parcel Number: \_\_\_\_\_

Name and Address of Property Owner: \_\_\_\_\_

\_\_\_\_\_ Phone Number:( \_\_\_\_\_ )

Name and Address of Contractor(if any): \_\_\_\_\_

\_\_\_\_\_ Phone Number:( \_\_\_\_\_ )

Greatest Sign Height: \_\_\_\_\_ Area of Largest Sign Face: \_\_\_\_\_

Sign Clearance from Bottom of Sign to Ground: \_\_\_\_\_

Is this a free-standing sign or will it be attached to another structure? Describe: \_\_\_\_\_

\_\_\_\_\_

Is the sign electrically illuminated? If yes, describe the number, type and location of lights to be used. Include external lights in the drawing: \_\_\_\_\_

\_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_



# SIGN PERMIT APPLICATION

Thornapple Township, 200 E. Main St., Middleville, MI 49333  
Phone: 269-795-7202 Fax: 269-795-8812  
Email: [zoning-administrator@thornapple-twp.org](mailto:zoning-administrator@thornapple-twp.org)

## FOR OFFICE USE ONLY:

1. Is sign as proposed allowed in sign regulations? Yes \_\_\_\_\_ No \_\_\_\_\_
2. Section of regulations applicable: \_\_\_\_\_
3. Height limit: \_\_\_\_\_
4. Sign face limit in square feet: \_\_\_\_\_
5. Setback required from property line: \_\_\_\_\_

Approve: \_\_\_\_\_ Denied: \_\_\_\_\_

If Denied, reason(s) for denial: \_\_\_\_\_

If Approved:

Address for sign: \_\_\_\_\_

Type of sign approved [check one]:	Pole	_____
	Monument	_____
	Wall Mounted	_____
	Off-premise	_____

Date of Approval: \_\_\_\_\_

Approved by: \_\_\_\_\_  
Signature

*Attach copy of application to this form*