

SIGN PERMIT APPLICATION

590 40th Avenue NE, Columbia Heights, MN 55421 • PH: 763-706-3670 • www.columbiaheightsmn.gov

**COMMUNITY
DEVELOPMENT**

DATE RECEIVED: _____

Please Note	All Applications shall be accompanied by a plan to scale which includes the details listed below.				
APPLICANT	<input type="checkbox"/> Property Owner	<input type="checkbox"/> Contractor	Email: _____		
SITE ADDRESS	_____				
PROPERTY OWNER / TENANT	Name: _____ Phone: _____ Address _____ City: _____ State: _____ Zip: _____				
CONTRACTOR Note: A City License is required	Name: _____ Phone: _____ Address: _____ City: _____ State: _____ Zip: _____				
PROPERTY TYPE	<input type="checkbox"/> Commercial / Industrial	<input type="checkbox"/> Institutional	<input type="checkbox"/> Multi-Family		
ZONING DISTRICT	<input type="checkbox"/> LB – Limited Business <input type="checkbox"/> CBD – Central Business	<input type="checkbox"/> GB – General Business <input type="checkbox"/> I – Industrial	<input type="checkbox"/> PO – Public & Open Space <input type="checkbox"/> Other		
SIGNAGE DETAILS	Number of Signs to be Installed:		Number of Existing Signs on the Property:		
	Square Footage of the Sign:		Width:	Length:	
	Constructed with: <input type="checkbox"/> Metal		<input type="checkbox"/> Metal & Wood	<input type="checkbox"/> Plastic	<input type="checkbox"/> Other
	Sign will be: <input type="checkbox"/> Illuminated		<input type="checkbox"/> Animated	<input type="checkbox"/> Changing Sign	<input type="checkbox"/> Electrical
DESCRIPTION OF WORK	_____				
LOCATION ON BUILDING	<input type="checkbox"/> Front	<input type="checkbox"/> Side	<input type="checkbox"/> Rear	<input type="checkbox"/> Roof	
	<input type="checkbox"/> Other				
VALUATION Labor and Materials	\$ _____		All Fees are Based on the job Valuation. The City of Columbia Heights uses an amended version of the 1997 U.B.C. Fee Schedule.		

THIS IS AN APPLICATION FOR A PERMIT - NOT VALID UNTIL PROCESSED

I hereby apply for a building permit and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the City of Columbia Heights and with the Minnesota Construction Codes; that I understand this is not a permit but only an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plan in the case of all work which requires review and approval of plans.

PRINT NAME: _____ **DATE:** _____

SIGNATURE OF APPLICANT: _____

PERMIT FEE:	\$ _____	Based on valuation-- (Call for a Quote) 763-706-3670—Minimum fee of \$35
PLAN REVIEW:	\$ _____	
SURCHARGE:	\$ _____	(0.0005) Times the Job Valuation
CONTRACT LICENSE:	\$ _____	
TOTAL DUE:	\$ _____	Make Checks Payable to the City of Columbia Heights