



4141 Douglas Drive North
 Crystal, MN 55422
 Phone: (763) 531-1000
 Fax: (763) 531-1188
 Website: www.crystalmn.gov



Application for Sign Permit

Temporary

Date _____ Permit No. _____ Rec'd by/Date _____

Site Address	_____
Tenant/Bldg Name	_____

Applicant: Owner Tenant or Contractor

Property Owner	Name/Company _____ Contact: _____ Address _____ City _____ State _____ Zip _____ Email Address: _____ Phone No. _____
Tenant or Contractor	Company _____ Contact: _____ Contact Person (Print) _____ Phone No. _____ Address _____ City _____ State _____ Zip _____ Email Address: _____ Phone No. _____

Type of Sign:

- Pennants
- Banner : Size _____ X _____
- Portable Sign: Size _____ X _____
- Other- specify: _____

Number of signs that will be placed: _____

Description and/or sketch of where the sign(s) will be placed: _____

Dates Sign Displayed: from _____ to _____

* * * (Over) * * *

