

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

Sign 1	Details: (i.e. message? shared sign? illumina	tion?)	
	Property Owner's written approval of sign.		
•	The temporary use of banners, pennants, portable Each permit is valid for seven consecutive days. Not more than six permits per property or tenant The permit must be prominently displayed at the	in a multi-te principal userivers or ped c sign or sign utility poles ilers. ion and dimen 10 feet of a r than ten feet ced within the fithe area of the control of the sign o	nant building may be granted in a 12-month period. e. estrians, or detract from the visibility of any official nal. or other such supports. ension requirements as permanent signs. ny lot line et from a street right-of-way. ne 40 foot visibility triangle
The untake the correct	ndersigned hereby certifies upon all of the penaltic he action herein requested, that all statements on	es of the law	y, for the purpose of including the City of Crystal to tion have been read and examined and are true and one in accordance with the ordinances of the City of
		App	licant's Signature/Date
Accepted and approved as submitted:		Prop	erty Owner's Signature/Date
STAI	FF USE ONLY:		
Notes	S:		
			Permit approved by
Co	opies to be charged to owner:		
Se	ee attached Conditions of Approval		Date