



DEXTER TOWNSHIP

6880 DEXTER-PINCKNEY ROAD
DEXTER, MI 48130

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SIGN PERMIT APPLICATION FORM

File #:	-ZP-
Received on:	
Fee:	\$ 80.00
Receipt #:	

(1) Property Information: <i>(property where the sign will be located)</i> a. Physical Address <i>(city and zip code not required)</i> b. Parcel/Tax ID Number(s) c. Zoning District <i>(circle one)</i> PL AG RC RR LR CU MHPR C-1		(2) Contractor Information: <i>(company installing the sign)</i> a. Name(s) b. Mailing Address c. Phone Number d. Email	
(3) Applicant Information: <i>(the person(s) applying for the sign permit)</i> a. <input type="checkbox"/> Owner <input type="checkbox"/> Agent for the Owner <i>(check one)</i> b. Name(s) c. Mailing Address d. Phone Number e. Email		(4) Owner Information: <i>(the person(s) owning the property)</i> a. <input type="checkbox"/> Same as Applicant <i>(check if appropriate)</i> b. Name(s) <i>(if different from applicant)</i> c. Mailing Address <i>(if different from applicant's mailing address)</i> d. Phone Number <i>(if different from applicant's phone number)</i> e. Email <i>(if different from applicant's email)</i>	
(5) Type of Sign: <i>Mark all that apply.</i>			
a. <input type="checkbox"/> New b. <input type="checkbox"/> Replacement	c. <input type="checkbox"/> Freestanding d. <input type="checkbox"/> Wall e. <input type="checkbox"/> Awning f. <input type="checkbox"/> Canopy	g. <input type="checkbox"/> Non-Illuminated h. <input type="checkbox"/> Illuminated i. <input type="checkbox"/> Electronic Message Sign (EMS)	j. <input type="checkbox"/> Business Center k. <input type="checkbox"/> Special Land Use in Residential District
(6) Sign Location: <i>Mark all that apply.</i> a. <input type="checkbox"/> Front Yard b. <input type="checkbox"/> Waterbody Yard c. <input type="checkbox"/> Facing On-Site or Shared Parking Lot		(7) Setbacks: <i>Enter all that apply.</i> a. Front Lot Line <i>(right-of-way)</i> : _____ feet b. Edge of Road: _____ feet c. Side Lot Line: _____ feet d. Waterbody: _____ feet	
(8) Sign Details: <i>Enter all that apply.</i> a. Number of Sign Faces: b. Distance Between Sign Faces: <i>(inches)</i> c. Sign Area: <i>(square feet)</i> d. Sign Height: <i>(feet)</i> d. Decorative Framing/Design Height: <i>(inches)</i>		(9) Illumination Details: <i>Only complete for illuminated signs.</i> a. <input type="checkbox"/> Sign is equipped with timer control b. <input type="checkbox"/> Backlit sign has darker background color c. <input type="checkbox"/> Wiring is underground d. <input type="checkbox"/> Lights are directed downward and/or are shielded e. <input type="checkbox"/> EMS is equipped with 16-stage or better automatic dimmer f. <input type="checkbox"/> Manufacturer certification that EMS meets §22.40(F)(2&3)	

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(10) Applicant(s) Affidavit: *(to be signed and dated by the applicant)*

- I hereby certify that I am the owner of the subject property or have been authorized to act on behalf of the owner(s) and that all of the statements and attachments are true and correct to the best of my knowledge and belief.
- I acknowledge that approval of a sign permit only grants that which was presented as part of this application.
- I understand that I am required to submit revised plans prior to construction if any changes are made to the sign before construction.
- I acknowledge that filing of this application grants access to the Township to conduct onsite investigation of the property in order to review this application.
- I acknowledge that I will contact the Chelsea Area Construction Agency and obtain any necessary building permits for the sign.
- I acknowledge that I will contact the Township for preliminary and final inspections.
- I understand that this sign permit is only valid for 180 days from the date of issuance.
- I understand that this sign permit will be void if the sign is constructed in a manner inconsistent with the Zoning Ordinance.

Applicant's Signature

Date

Applicant's Signature

Date

(11) Property Owner(s) Affidavit: *(to be signed and dated by the property owner(s) if the applicant is not the property owner- it should be signed by all property owners)*

I, _____, hereby state that I am the owner of the property described in this application and that I have authorized _____ to act as my agent for the purpose of obtaining the variance(s) described in this application.

Property Owner's Signature

Date

Property Owner's Signature

Date

(12) Administrative Section:

Sign Permit Approved Sign Permit Denied

Conditions of Approval:

Zoning Official's Signature

Date

Final Certificate of Zoning Compliance

Notes:

