Haven Township P.O. Box 339 St. Cloud, MN 56302-339 (320) 492-6241

Application for Sign Permit				
Sign Permit	Application Fee \$250 Off-Premise \$100 On-Premise	Receipt No Date Paid		
	\$ Total Paid	Date of Complete Application: (for office use only)		
Fees are Non-Refundable				

To be completed by A	pplicant
Applicant's Name: Daytime Phone:	
Applicant's Address:	Cell Phone:
	Email:
Property Owner(s):	
Property Owner's Address:	
Legal Description:	
Acreage: Section: Township: _	 Range:
PID: Zoning Dis	strict:
Sign #1:	
Type of Sign: Ground Pole Sign Awning/Ca	nopy Wall Sign
Ground Monument Sign Off-Premise	Other:
Sign Faces: Double Faced Single Faced_	
Ground Signs:	
Overall height above grade ft.	
Height above ground to bottom of sign ft.	
Wall Signs:	
Wall area square footage; Location on wall	
Sign: Height Width Depth Square I	-ootage
Description of Sign:	

Sign #2:					
Type of Sign: Ground Pole Sign Awning/Canopy Wall Sign					
Ground Monument Sign Off-Premise Other:					
Sign Faces: Double Faced Single Faced					
Ground Signs:					
Overall height above grade ft.					
Height above ground to bottom of sign ft.					
Wall Signs:					
Wall area square footage; Location on wall					
Sign: Height Width Depth Square Footage					
Description of Sign:					
Sign #3:					
Type of Sign: Ground Pole Sign Awning/Canopy Wall Sign					
Ground Monument Sign Off-Premise Other:					
Sign Faces: Double Faced Single Faced					
Ground Signs:					
Overall height above grade ft.					
Height above ground to bottom of sign ft.					
Wall Signs:					
Wall area square footage; Location on wall					
Sign: Height Width Depth Square Footage					
Description of Sign:					
Applications will not be considered complete until the following has been received					
Application to be signed and dated by Applicant(s) and Property Owner(s)					
Fees Paid Receipt # Recording Fee Paid: Pylon/Ground Signs					
Proposed sign drawing showing size and lettering, footing size and height above grade					
Site plan showing distance of proposed sign(s) from property lines and distance of existing sign(s) from					
property lines Location of any body of water or wetland					
Distance to other off-premise signs on the same side of right-of-way					

Wall Signs
Proposed sign drawing showing size and lettering and projection(s) away from wall(s)
Wall elevation showing full wall length and height and all proposed and existing signs
Engineering drawings as needed
Other

I hereby apply for a sign permit and acknowledge the information above is complete and accurate; that the work will be performed in accordance with the conditions and permit; and that the work will conform to the ordinances of Haven Township. I understand that this is **not** a permit, and that the person doing the work is responsible to call for any required inspections. Permit becomes void if work is not completed within 180 days of date of issuance.

Applicant's Signatur	e:		Date:
Print Name of Applic	cant:		
Property Owner(s) S	Signature:		Date:
Print Name of Owne	er(s):		
By signing this Applica	ation, the landow	ner(s) agree to permit the Tov	wn to enter the property for the
purposes of inspecting	the property.		
Return Application	s to:		
Haven Township			
P.O. Box 339			
St. Cloud, MN 56302	2		
Application is:			

What happens next?

The Zoning Administrator will review your application and mail you a letter if your application is complete, or a letter stating the reasons why your application is not complete, and what additional information is needed. Your Application will then be reviewed by the Zoning Administrator for approval, denial, or it may send your request back for additional information.

If you have any questions, please call Haven Township at (320) 492-6241.