

Sign Permit Application

City of Pine Island

250 S. Main Street

Box 1000

Pine Island, MN. 55963

Phone (507) 356-4591

Fax (507) 356-8230

Applicant Name: _____ Date: _____

Applicant Signature: _____

Address of Applicant: _____

Phone Number: _____

Sign Address Location: _____

Type of Sign: Circle appropriate descriptions: Attached

Freestanding Projecting

Size of sign Width: _____ Height: _____

Height from ground to bottom of sign: _____

Distance From Property line or Right of Way _____

Fee: \$75.00 Date Paid: _____

Sketch or attach picture

Zoning Official: Approved Not Approved

Name: _____ Date: _____

HPC: Approved Not Approved Date: _____

Signed: _____