Permanent Sign Permit Application				SECKER TOWNSHIP
Becker Township	C		5	SHO IN MID
PO Box 248		www.beckertownship		
Becker, MN 55308		763-261-5301		
DROP YOUR APPLIC	ATION AND FE	e off at Becker Ci	ty Hall,	
		VENUE, BECKER, MN	. PHONE	
ıs <u>(763) 261-4302</u> .	HOURS ARE 8	-4:30, M-F .		
			Date Received	
Fas Dassivade \$20		Choole #	Crod	Above for Office Use Only it Card
ree Receiveu. 530		□ Check #		(name on card)
PHONE	FAX		_EMAIL	
BUILDING OWNER				
ADDRESS				
CITY		_STATEZIP		_
Type of Work	_New	Add	Repair	Replace
Sign Location Address				
Type of Sign(s)	_Wall	Pylon or Monu	ment	
Area of Proposed Sign	Square	Feet Area of Existing	g Sign	_Square Feet
Height of Proposed Sig	n	_		
1	U	scale for freestanding	0	ent/pylon) showing
		ce to the property lines		
Attach colored materials, light		nstruction drawings dra	awn to scale (i	nclude the dimensions,

PLEASE NOTE:

According to state law, you must contact Gopher State One Call to locate any underground utilities before you dig. You should call GSOC 2 business days before digging. Business hours are 7am to 5pm Monday through Friday. Please call (800) 252-1166.

NOTICE:

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be compiled with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any state law or local law regulating construction of the performance of construction.

This application must be signed by the owner of the subject property.

We, the undersigned, have read and understand the above.

Signature of Applicant or Contractor (if acting as the applicant)				
Signature of Owner		Date		
OFFICE USE ONLY				
Sign Permit Approved By	on			
	011	Date		