

Permanent Sign Permit Application

Zoning/Application Questions? 763-261-5301
Inspections: 763-479-1720
Email completed application & documents
Permits@beckertownship.org

Drop off at 12165 Hancock Street, Becker. M/T/W/F 8-4:30. Closed Thursdays & Federal Holidays

Building Permits are paid for at pickup.

Do not begin any work until permit is issued.

Permits missing any information will not be accepted.

Parcel Identification Number: 05 Sign Location Address (required if not same as owner's address	<u></u>	Permit No.
No address? Subdivision, Lot and Block:	•	_
Property Owner Name: Phone: Address: City/State/Zip Code:		
Contractor (if blank, Property Owner Waiver required): Company Name: License/Bond: Address: City/State/Zip Code: Contact Person:	Type of Work – One O New O Additional O Repair O Replace	Off Premise Signs are not allowed
Email: Phone: Cell:	O Commercial O Residential VALUATION	O Permanent O Temporary
Type of Sign(s)	onument	nSquare Feet
Height of Proposed Sign Attach a site plan drawing to scale for freestanding property lines. If freestanding or pylon sign is over Minnesota Registered Land Surveyor is required shown in Dimensions of all lot lines All easements of record Location of all public utilities Names of abutting streets Locations of all structures Parking and drive areas Proposed sign location Grade elevations ten (10) feet on	50 square feet, a certificate owing	nation and distance to the of survey by a nes and sign location surveyor with the of survey. Tained throughout the nathrough final

each side of the proposed sign

location

	ite design construction drawings	drawn to scale showing		
ColorMateria	la.			
	. footage			
•	illumination			
		ony available from Becker To	wnshin wehsite	
	☐ Verify compliance with current sign ordinance (copy available from Becker Township website https://beckertownship.org/ordinanceszoning.html);			
	I hereby apply for a Permanent Sign Permit, iderstand this is <u>not</u> a permit and work is not to			
application; the only permitt work is subject to all condition of the submitted and approv	ree that the work for which the permit is issue ed work is that which is within the scope of the ons of the permit and the approved plans and yed plans and/or specifications may require acted within 180 days, or if construction or work is	e plans and specifications submitted w specifications. I further understand ar Iditional permits. This permit becomes	ith the permit application, and the ny or all work conducted beyond those null and void if work or construction	
All provisions of laws and or	have read and examined this application and a rdinances governing this type of work will be or ty to violate or cancel the provisions of any other.	omplied with whether specified herein	or not. The granting of a permit does	
the natural environment an Ordinance, or other Towns 1. Structure design that ar 2. Lots or plats that ar 3. Situations in which Operation of tracked grad I acknowledge I acknowledge	Zoning Administrator or Building Official mad public health, safety and welfare, or for any hip regulation. Denial of or conditions placed at contributes to or causes environmental development and susceptible to drainage, runoffice unique and susceptible to drainage, runoffice professional specialist review, certification, ding equipment on Town Roads is prohibit that if building plans change, additional plant an As-built survey must be submitted be signed by the owner(s) of the subject to the su	y reason deemed inconsistent with the dupon a building permit may include, gradation and erosion. or completion of work is deemed need ted per State Statute 169.72. Deermit reviews, fees, and/or application to the Town Hall prior to receiving	e Comprehensive plan, Zoning but are not limited to: cessary by the Zoning Administrator.	
We, the undersigned,	have read and understand the above			
Signa	ture of Applicant or Contractor (if act	ing as the applicant)	Date	
Signa	ature of Owner(s)		Date	
Signa	ature of Owner(s)		Date	
	Township	Use Only		
Permit #		Other information/Conditions		
Sign Fee				
Investigative Fee				
State Surcharge Fee		Cash Discount Total		
Other		Credit Card Total		
Other Description		Date Paid/Pmt ID		
Admin Fee	30.00	Paid By	•	