

CITY OF SPRINGFIELD
APPLICATION FOR ZONING PERMIT FOR SIGN

1. DATE _____
2. NAME & ADDRESS OF APPLICANT _____

3. PHONE NUMBER _____
4. SIZE OF SIGN _____
5. ESTIMATED COST _____
6. NAME OF CONTRACTOR _____

***OWNER CERTIFIES THAT CONTRACTOR HAS A VALID CITY LICENSE.**

7. ATTACH WITH APPPLICATION: A plan drawn to scale, showing the dimensions of the sign and position it will be erected on your property.
8. A Zoning Permit shall become void twelve (12) months from the date of issuance unless substantial progress has been made by that date on the construction or alteration authorized herein. A zoning permit may be renewed upon review by the Enforcement Officer before it becomes void.
9. NOTE: The CITY OF SPRINGFIELD will review your permit as soon as practical but you shall not begin work on this proposal until you have received an approved permit.

Signed _____ **Printed Name** _____ **Date** _____

OFFICE USE ONLY

___APPROVED___ DISAPPROVED___ VARIANCE REQUIRED

1. PERMIT ISSUED ON _____
2. AMOUNT OF PERMIT FEE: \$25.00

Zoning Enforcement Officer

3. PERMIT FEE PAID ON _____
4. PERMIT FEE ACCEPTED BY _____