



CITY OF CHASKA PERMANENT SIGN PERMIT APPLICATION

SITE ADDRESS: _____

Owner: _____

Applicant: _____

Address: _____ City: _____ Zip: _____

Phone: (____) _____ Fax: (____) _____

Email: _____ Date of Installation: _____

TYPE OF SIGN: (Please check all that apply)

- | | | |
|-------------------------------------|--|--|
| <input type="checkbox"/> New | <input type="checkbox"/> Wall Mounted | <input type="checkbox"/> Illuminated |
| <input type="checkbox"/> Alteration | <input type="checkbox"/> Free Standing | <input type="checkbox"/> Non-Illuminated |

SIZE OF SIGN:

Length: _____ Total Area: _____ sq. ft. Height: _____ ft.
 Height: _____ (if free standing)

If a wall sign, please provide the following:

Wall area: _____ sq ft Percentage of Wall Coverage by Sign: _____

Value of Sign: \$ _____

SIGN MATERIALS: _____

FILING REQUIREMENTS:

- ◆ Two color copies of scaled drawing of sign face (include support structure if free standing)
- ◆ Two copies of site plan showing sign location
- ◆ Two copies of specifications for the construction of the sign, including colors, dimensions, and illumination, if any
- ◆ Permit fee: Not refundable. Please make check payable to "City of Chaska."

- | | |
|---|---|
| <input type="checkbox"/> Wall Sign or Alteration of Sign: \$75.00
(Awning Sign, Projecting Sign, Face Changes) | <input type="checkbox"/> Free Standing Sign: \$125.00 |
|---|---|

THE UNDERSIGNED HEREBY AGREES TO DO ALL WORK IN ACCORDANCE WITH THE CHASKA CITY CODE AND THE RULINGS OF THE BUILDING INSPECTIONS DIVISION.

Applicant's Signature: _____ Date: ____ / ____ / ____

Property Owner's Signature: _____ Date: ____ / ____ / ____

For City of Chaska Use Only

Permit #: _____ Receipt #: _____

Permit Fee: \$ _____ Date: ____ / ____ / ____

Approvals

Building Dept.: _____ Planning Dept.: _____

Date: ____ / ____ / ____ Date: ____ / ____ / ____

ONE CITY HALL PLAZA CITY OF CHASKA CHASKA, MN 55318 ph: (952) 448-9200