SIGN PERMIT APPICATION

226 Mystery Lake Road Thompson, MB R8N 1S6 Chief Building Inspector, 204-677-7906 Building Inspector, 204-677-7953



*PROVIDE A COPY OF SITE PLAN (SURVEYORS BUILDING CERTIFICATE) *PROVIDE 1 SET OF WORKING DRAWINGS (ELEVATION DRAWINGS, SIGN DETAILS)

ADDRESS OF SIGN:	NAME OF BUILDING SI	NAME OF BUILDING SIGN IS INSTALLED:		
APPLICANTS NAME:				
MAILING ADDRESS:	Phone	FAX:		
DESCRIPTION OR ILLUSTRATION OF DISPLAY				

CONSTRUCTION VALUE \$_____ PERMIT FEE \$____

No	TYPE	SURFACE AREA IN	NEW	DIMENSIONS
		IN SQ.FT	ADDITION	
			REPLACEMENT	
	EDEE			
	FREE STANDING		NEW ADDITION	VERTICAL HORIZONTAL
			REPLACEMENT	DEPTH
			NEW	VERTICAL
	FACIA		ADDITION REPLACEMENT	HORIZONTAL DEPTH
			REPLACEMENT	
			NEW	VERTICAL
	OTHER		ADDITION	HORIZONTAL
			REPLACEMENT	DEPTH
ADDITIO	NAL INFORMATIO	DN:		

FEES: DEVELOPMENT PERMIT PLUS SIGN PERMITS ARE CHARGED FOR ALL SIGN APPLICATIONS					
DEVELOPMENT PERMIT FEES:	VALUE UNDER \$5,000 = \$ 60.00				
	VALUE OVER \$5,000 = \$ 120.00				
SIGN PERMIT FEES:	SIGN VALUE UP TO \$5,000 = \$163.00				
	SIGN VALUE OVER \$5,000 = \$324.00				
FEES SUBJECT TO CH					

I, the undersigned ,___

____ am authorized applicant/owner named in

the application for a Sign Permit. I acknowledge the plans and specifications are correct, accurate and adhere to any applicable legislation, Zoning By-Laws and Codes and Standards.

Any changes from the drawings, specifications or location of the sign as specified in the application permit shall **VOID** the Permit.

Signature of Authorized Applicant			Date		
	WHEN PROPERLY VALIDATED - THIS IS YOUR PERMIT				
ASSIGNMENT:	VALIDATED:	DATE:	PERMIT #		