



SIGN PERMIT APPLICATION

City of Lino Lakes
600 Town Center Parkway
Lino Lakes, Minnesota 55014-118
Building Department: 651-982-2420
Fax: 651-982-2499
building@linolakes.us

Job Site Address: _____ Suite #: _____

Lot _____ Block _____ Subdivision _____

Total Project Valuation: \$ _____

The Applicant is: ☐ Owner ☐ Contractor

PROPERTY OWNER	Name _____ Daytime Phone () _____ Address _____ Suite # _____ City _____ State _____ Zip _____ E-mail _____
SIGN CONTRACTOR	Name _____ Daytime Phone () _____ Address _____ Suite # _____ City _____ State _____ Zip _____ E-mail _____
PROPERTY TYPE	CONSTRUCTION TYPE
☐ Single Tenant ☐ Multi-Tenant	☐ Temporary Sign (Zoning Permit) Start Date: _____ End Date: _____ Total Number of Days _____ ☐ Banner ☐ Portable ☐ Sandwich Board ☐ Permanent Sign (Building Permit) ☐ Building Wall ☐ Ground/Pylon/Monument ☐ Area Identification Sign (Residential)
☐ Agricultural ☐ Commercial ☐ Industrial ☐ Institutional ☐ Manufactured Home ☐ Single Family ☐ Townhome	

SIGN INFORMATION	Construction Materials _____
	Dimensions: Height _____ x Length _____ = Total Square Feet _____
	<u>For Building Wall Signs:</u> Total Square Feet of Wall Façade Elevation _____
	Percent of Sign to Wall Size _____

TO BE SUBMITTED (2 SETS EACH) (Applications will be reviewed after all required items are submitted)
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☐ | Certificate of Survey/Site Location Plan Showing Sign Location and Setbacks

Building Elevation Showing Sign Location and Measurements

Sign Details & Specifications

Lighting Details (Illuminated Temporary Signs are not allowed)

Wind Load/Footings/Engineering Details |
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I hereby apply for a sign permit and I acknowledge that the information above is complete. I understand this is not a permit and work is not to start without a permit.

_____ Applicant Signature	_____ Date
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OFFICE USE ONLY	
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TOTAL VALUATION \$ _____	ZONING DISTRICT _____
TYPE OF CONSTRUCTION _____	OCCUPANCY GROUP _____
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TOTAL AMOUNT DUE \$ _____	
PLANNING APPROVAL: _____	DATE: _____
BUILDING APPROVAL: _____	DATE: _____
PERMIT # _____	