

SIGN PERMIT APPLICATION

TO: City of West Union
P.O. Box 151
West Union, IA 52175

Date Submitted: _____

SIGN AND SITE OWNERS

Owner of Sign:

Name: _____ Phone: _____

Address: _____
(Street) (City, State) (Zip Code)

Owner of Land:

Name: _____ Phone: _____

Address: _____
(Street) (City, State) (Zip Code)

SIGN LOCATION

Describe Location: _____

*Also locate sign on map on back of application, giving distances from all intersections, road right-of-way and traveled portions of roadways.

SIGN DESCRIPTION

Sign Size:

Height _____ feet; Width _____ feet (include borders); Area _____ sq. feet;
Distance from ground to top of sign _____

Sign Type:

Single face _____; Back to Back _____; V-Type _____; Side by Side _____;
Double Deck _____

Substructure:

Number of Supports _____; Wood _____; Steel _____; Other (specify) _____

Surface Type:

Painted _____; Poster Panel _____; Other (specify) _____

Illuminated: Yes _____ No _____

Reflectorized: Yes _____ No _____

**Sketch sign on back of application or attach drawing or picture of sign

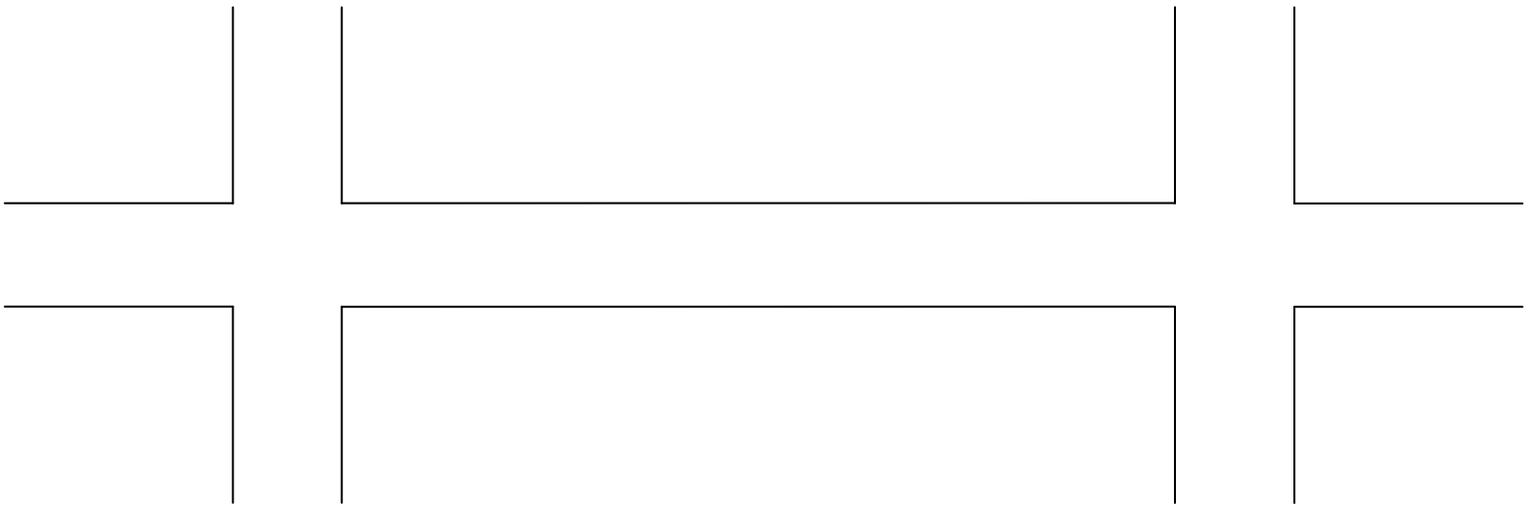
ZONING: Zoning Classification: _____

CERTIFICATION

I certify that the foregoing and attached information is current, true and correct, and that the same is being furnished to the City of West Union, Iowa, for the purpose of complying with Chapter 155 of the West Union Revised Ordinances of 2008.

Fee Enclosed \$ 25.00

Applicant's Signature



Indicate street names, location of sign, distance from right-of-way and traveled portion of roads along and intersecting.

SIGN SKETCH

Indicate sign and support design with dimensions shown.