



22817 Typo Creek Drive N.E. • Stacy, MN 55079  
Phone (651) 462-2812 • Fax (651) 462-0500  
E-Mail: [records@linwoodtownship.org](mailto:records@linwoodtownship.org)

## **SIGN PERMIT APPLICATION PACKET**

### **Sec. 30-1163 thru Sec. 30-1296**

An application for a sign permit shall be made to the planning and zoning commission on an Application for Sign Permit form available from the town clerk or the township website. Each application must be accompanied by a non-refundable application fee.

Upon review, the planning and zoning commission will make a recommendation to the town board for acceptance or denial of the sign.

Please refer to the sign ordinance Sec. 30-1163 thru 30-1296 for regulations regarding sign permits.

If the town board approves the application, the town clerk shall be instructed to issue a sign permit to the applicant upon receipt of the receipt of the required sign permit fee. The permit shall be dated,

Sign permits renew every two years. There is a biennial fee for the renewal of a sign permit.

### **Checklist and Procedure for Obtaining a Sign Permit**

1. Submit the following:
  - Completed Sign Permit Application form
  - Site plan or sketch, showing the location of all buildings, driveways and other improvements and topographical features and the proposed sign. The application must be accompanied by a drawing of the proposed sign, which drawing must give the dimensions of the sign. Graphics of the proposed sign, including dimensions
  - \$50.00 non-refundable Sign Permit Application Fee
2. Attend Planning & Zoning meeting for a recommendation to the Town Board
3. Attend Town Board meeting for approval.
4. If sign permit is granted, there is an annual sign permit fee as set by the Town Board
5. If work authorized under a sign permit has not been completed six months after the date of issue of the permit, then the permit shall become null and void.



22817 Typo Creek Drive N.E. • Stacy, MN 55079  
Phone (651) 462-2812 • Fax (651) 462-0500  
E-Mail: records@linwoodtownship.org

File # \_\_\_\_\_  
Fee \$ \_\_\_\_\_ Rcpt # \_\_\_\_\_  
Chk # \_\_\_\_\_ Date: \_\_\_\_\_  
Escrow \$ \_\_\_\_\_ Rcpt # \_\_\_\_\_  
Chk # \_\_\_\_\_ Date: \_\_\_\_\_

## Application for SIGN PERMIT

### Applicant:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Day phone \_\_\_\_\_ Cell phone \_\_\_\_\_  
Email \_\_\_\_\_

### Owner: (if different from applicant)

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Day phone \_\_\_\_\_ Cell phone \_\_\_\_\_  
Email \_\_\_\_\_

### Property Information

Property Address \_\_\_\_\_  
Property ID Number: \_\_\_\_\_ Present Zoning and Use \_\_\_\_\_  
Full Legal Description (attach if lengthy: \_\_\_\_\_  
Purpose of Sign: \_\_\_\_\_ Single or Double Face: \_\_\_\_\_  
Size of Sign: \_\_\_\_\_ Sign Height, including structure: \_\_\_\_\_ Sq Ft of Sign: \_\_\_\_\_

### Data furnished in this application form is public information.

I hereby authorize the Planning and Zoning Administrator, Commission members and Town Board members to enter upon this property for such inspections as necessary for the review of this application. In signing this application, I hereby acknowledge that I have read and fully understand the applicable provisions of the Zoning Ordinances and further acknowledge the explanation as outlined in the application and administrative procedures and hereby agree to pay all statements received from the Township pertaining to additional application expense(s).

### Signature of Applicant

\_\_\_\_\_

Date: \_\_\_\_\_

### Signature of Owner (if different from Applicant)

\_\_\_\_\_

Date: \_\_\_\_\_

**Application for SIGN PERMIT**  
**Page 2**

**Application Fee: \$200.00**

**Escrow: \$500.00**

**For Office Use only**

File # \_\_\_\_\_

Application Received by: \_\_\_\_\_

Date: \_\_\_\_\_

Document Verification by: \_\_\_\_\_

Date: \_\_\_\_\_

Additional Information Requested: \_\_\_\_\_

Application Deemed Complete by: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Zoning Administrator

Date: \_\_\_\_\_