



320-845-4244
 PO Box 370
 Albany, Minnesota 56307

PERMANENT SIGN APPLICATION

APPLICANT: PROPERTY OWNER CONTRACTOR

PROPERTY OWNER NAME: _____

ADDRESS: _____

CITY, STATE, ZIP CODE: _____

PHONE NUMBER: _____

EMAIL: _____

CONTRACTOR: _____

ADDRESS: _____

PHONE NUMBER: _____

EMAIL: _____

PROJECT INFORMATION

CLASS OF WORK: NEW SIGN ADDITIONAL SIGN SIGN REPLACEMENT

SIGN(S) LOCATION ADDRESS: _____

TYPE OF SIGN	SIGN LENGTH	SIGN WIDTH	TOTAL SQ. FEET	SIGN HEIGHT (IF APPLICABLE)

SUBMITTAL INSTRUCTIONS – ALL OR PART OF THE FOLLOWING INFORMATION IS REQUIRED WITH APPLICATION.

1. **NO WORK IS TO BE PERFORMED PRIOR TO PERMIT APPROVAL.**
2. Applications for permits **must** comply with the requirements of City of Albany Zoning Ordinance 80, Section 80.11 for sign permit applications.
3. All existing signs on the property and their respective locations with dimensions, setbacks, and height.
4. Specifications for signs - include distant from building wall surface for wall mounted signs
5. Locations for all structures and their square footages
6. Public right-of-ways, sidewalks, driveways, parking, easements, etc.
7. Permit fee of \$30.00 paid to City of Albany

I hereby certify, with my signature, that all data on my application, plans and specifications, are true and correct. I assume responsibility for executing this request within Albany City Ordinances. Application for a zoning permit shall be considered permission on the part of the applicant to allow inspection of the property by officials.

AUTHORIZED SIGNATURE OF OWNER(S)

ZONING OFFICIAL

FOR OFFICE USE ONLY

DATE FILED: _____

ZONING CLASSIFICATION:

- C1 C2 C3 M1 M2 PUB R1 PUD R1PUD R2
 R3 R4

PID #: _____

\$30.00 PERMIT FEE RECEIVED: YES NO