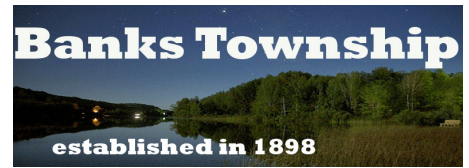


# SIGN PERMIT APPLICATION

Banks Township, Antrim County, Michigan  
6520 Center Street, Ellsworth, Michigan 49729  
Phone: 231.588.6126  
Website: www.bankstownshipmi.gov  
Zoning Administrator: Kurtis Busman  
(231) 676-2414 or zoning@bankstownshipmi.gov



Application Number: \_\_\_\_\_

Address: \_\_\_\_\_  
Parcel #: \_\_\_\_\_ Current Zoning: \_\_\_\_\_  
Name of Property Owner(s) \_\_\_\_\_  
Property Owner's Current Mailing Address \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## SIGN CHARACTERISTICS

Description of Sign: \_\_\_\_\_

Permanent  Temporary Sign (Dates requested) \_\_\_\_\_  
Total Number of Signs Desired (see 4.21.3j for considerations): \_\_\_\_\_  
Total Square Feet (per one side): \_\_\_\_\_ Dimensions: \_\_\_\_\_  
Sign Height: \_\_\_\_\_ Setback distance from nearest property line: \_\_\_\_\_

### Sign Location:

On-Premise  Off-Premise (includes billboards)

### Sign Type (Please check all that apply):

- Animated
- Non-Animated
- Free-standing
- Mounted

If animated, please describe how will it be shielded: \_\_\_\_\_

## AFFIDAVIT

**Affidavit:** I (we) the undersigned affirm that the foregoing answers, statements, and information are in all respects true and correct to the best of my (our) knowledge and belief.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name: \_\_\_\_\_

## FOR TOWNSHIP USE ONLY

Date Received: \_\_\_\_\_ Signature: \_\_\_\_\_  
Complete Application? \_\_\_\_\_ Notes: \_\_\_\_\_