## Temporary Sign Permit Application City of Long Lake 450 Virginia Avenue PO Box 606 Permi



Permit No:	·····
Date Received: _	
Date Issued:	

Long Lake, MN 55356			Date Received:			
Phone: (952) 473-6961			Date Issued:			
Site Information						
Site Address:			Suite/Unit#:			
Zoning District:						
Applicant / Contracto	or Information					
Name:						
Address:						
City, State, Zip:						
Daytime Phone:						
Owner Information						
Name:						
Address:						
City, State, Zip:					· · · · · · · · · · · · · · · · · · ·	
Daytime Phone:						
Applicant Signature						
The applicant hereby ag	rees to comply with	າ the Sign Ord	inance and ruling c	of the City of Lon	g Lake.	
Signature			Date			
Sign Information – At	tach Drawings o	of Proposed	Signs			
Type of temporary sign						
# of Signs	Туре	Length	Width	Area	<del>_</del>	
<u> </u>	Wall		х	= sf	<del>_</del>	
	Freestanding		х	= sf		
Reason for temporary sig	n:					
Number of days sign will	be displayed:	 Dates	:/	to/		
FOR OFFICE USE ON	LY		PERMIT FEE - \$30	0		
Review by Planning & Zoning: Approved Denied			Please Note: Permits for signage installed without prior permit approval will be charged double.			
Reason(s) for Approval/Denial:			Total Due: \$  Date Paid:/  Cash or Check #:			