## APPLICATION FOR SIGN PERMIT

Mussey Township 135 N. Main St. Capac, MI 48014

Applicant's name:				
Address:				
City:		State:	_Zip Code:	Phone:
Name of Business or Activity Business Address: Sign Designer/Installer: Business Address: Telephone Number:() Existing Zoning: Required Plans Attached:	Requiring Si	gn:Existi	ng Use:	
Estimated Completion of Prop		C		
Are you the sole owner of the				
Provide the names, addresses a property. (All persons having by	_		_	
Name (please print): Address: Interest: Signature:				
I do swear that all the statement application are true and accurate application and act on behalf of	nts, signature	es, descriptior t of my know	s and exhibits s ledge and I am	ubmitted on or with this
Signature of Applicant			Date	
	Of	ffice Use Only		
Date Received:I	Received by:_	eived by:Fees Paid:		
Planning Commission Meeting D				d □ Denied
Conditions:				