



# CITY OF WILLMAR SPECIAL SIGN PERMIT APPLICATION

DATE: \_\_\_\_\_ FEE PAID: \_\_\_\_\_ DEPOSIT PAID: \_\_\_\_\_ APPLICATION #: \_\_\_\_\_

APPLICANT'S NAME \_\_\_\_\_ PARCEL # & ADDRESS OF SIGN LOCATION \_\_\_\_\_ ZONING DISTRICT \_\_\_\_\_

OWNER'S NAME (if different than applicant) \_\_\_\_\_ OWNER'S ADDRESS \_\_\_\_\_

PROPERTY OWNER'S NAME \_\_\_\_\_ PROPERTY OWNER'S ADDRESS \_\_\_\_\_

SIGN CONTRACTOR \_\_\_\_\_ CONTRACTOR'S ADDRESS \_\_\_\_\_

TYPE OF SIGN \_\_\_\_\_ HEIGHT X WIDTH – AREA (SQ. FT.) \_\_\_\_\_

OVERALL HEIGHT \_\_\_\_\_ SETBACK \_\_\_\_\_ VEHICULAR CLEARANCE \_\_\_\_\_ PEDESTRIAN CLEARANCE \_\_\_\_\_

ZONING ORDINANCE STANDARDS MET?  
Section 2.4.C.1.-C.4 Yes \_\_\_\_\_ No \_\_\_\_\_  
6.3.C.3 Yes \_\_\_\_\_ No \_\_\_\_\_  
6.3.C.2 Yes \_\_\_\_\_ No \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_

PERMIT DETERMINATION  
  
APPROVED: \_\_\_\_\_  
  
DENIED: \_\_\_\_\_  
  
DATE: \_\_\_\_\_

CONTACT PHONE # \_\_\_\_\_  
  
\_\_\_\_\_  
**APPLICANT'S SIGNATURE**  
  
\_\_\_\_\_  
ZONING ADMINISTRATOR'S SIGNATURE

FEE AMOUNT PAID: \_\_\_\_\_  
DEPOSIT AMOUNT PAID: \_\_\_\_\_  
DATE PAID: \_\_\_\_\_  
PAYMENT TYPE: \_\_\_\_\_  
CHECK NO.: \_\_\_\_\_  
RECEIPT NO.: \_\_\_\_\_

ATTENTION: Right-of-way location verification is the responsibility of the applicant.