

City of Arnolds Park, Iowa Application for Sign Permit

Phone: (712) 332-2341 ~ 156 N. Highway 71 ~ PO Box 437 ~ Arnolds Park, Iowa 51331 ~ Office Hours: 8am – 4pm

1. LOCATION OF PROPOSED SIGN

Street Address _____
Legal Description _____ (Lot) _____ (Block) _____ (Subdivision)

2. APPLICATION IS MADE BY

Name: _____ owner/developer/agent
(Please circle one)

Owners Name (if not listed above): _____ Phone: _____

Street Address: _____

City, State, Zip: _____

E-mail Address: _____

Contractor Name: _____ Phone: _____

3. REASON FOR SIGN PERMIT

What type of sign is being proposed? _____ *(e.g. wall, freestanding, roof, etc.)*

This permit is for: _____

The sign will be located in the _____ zoning district

The sign will be _____ feet for the total height from the adjoining ground

The sign will be _____ feet from the front property line or street right-of-way line.

The sign will be _____ feet from the nearest building or ____ (check) if located on the building wall

Value of proposed sign(s): \$ _____

PLEASE ATTACH A VISUAL DEPICTION, IMAGE, PHOTO AND TEXT OF THE PROPOSED SIGN(S).

The undersigned applicant, by signature, indicates his/her agreement to the conditions outlined in this permit, and to adhere to the Arnolds Park sign regulations.

Applicant Signature (or Authorized Representative)

Date

ARNOLDS PARK SIGN PERMIT APPROVAL (FOR USE BY CITY OF ARNOLDS PARK ONLY)

This application and site plan has been reviewed and is determined to be in compliance with the regulations.

This sign permit is: Approved Denied as presented on this date: _____

Signed: _____ Arnolds Park Zoning Administrator

Copy Sent to Applicant on: _____

Sign Permit Fee Paid: Yes No \$ _____