



City of Walled Lake  
1499 E. West Maple  
248-624-4847 Fax 248 624-1616

**For Department Use Only**

Date Received \_\_\_\_\_

Number of plan sets received \_\_\_\_\_

**SIGN PERMIT APPLICATION**

DATE \_\_\_\_\_ JOB ADDRESS \_\_\_\_\_ Estimated Construction Value \_\_\_\_\_

**1. Owner's Information**

Name \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ MI, Zip Code \_\_\_\_\_ Phone \_\_\_\_\_  
Email \_\_\_\_\_

**\*\*Please provide e-mail address for expedited plan review results\*\***

**2. Contractor's Information**

Name \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ MI, Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_  
Builder's License Number \_\_\_\_\_ Federal Employer ID/Exemption \_\_\_\_\_  
Worker's Compensation Insurance Carrier or reason for exemption \_\_\_\_\_  
Copy of Insurance Required  
MESC Employer Number or reason for exemptions \_\_\_\_\_  
Email \_\_\_\_\_

**\*\*Please provide e-mail address for expedited plan review results\*\***

**3. Plan examination fee: REQUIRED**

Plan Examination (Review) Fees		Total
<b>Minimum Fee</b>	<b>\$35</b>	\$35
Hourly rate after first hour	\$75	
<i>** Below indicates required plan review Determined by Building Dept.</i>		
<u>Review Fee Total</u>		

**4. Specific Permit Fees**

Specific Permit Fees		Total
<b>Application Fee</b>	<b>\$50</b>	\$50
Contractor Registration Fee	\$25	
Sign – Wall, Ground, Pylon, Pole, etc.	\$75 ea	
<u>Specific Permit Fee TOTAL</u>		
<b>TOTAL PERMIT FEE</b>		

**5. Applications Requirements**

The Applications shall contain the following information:

General Regulations:

**Sign area shall be determined as follows:**

**The total area of all signs for any individual business shall not exceed three (3) sq. ft. per one (1) foot of building frontage. Applicant must provide sq. ft. of building frontage and the size and dimensions of the sign (s).**

- \_\_\_ a. Location of the building, building frontage, structure, and parcel on which the Sign is to be attached or erected.
- \_\_\_ b. Position of the sign in relation to nearby buildings, structures, property lines, and existing or proposed right-of-way. Signs may not be placed
- \_\_\_ c. Two copies of the plans and specifications. The method of construction, and/or attachment to a building, or ground placement, shall be explained in the plans and specifications.
- \_\_\_ d. A copy of calculations, if deemed necessary by the Planning Department, showing the structure as designed for dead load and wind pressure.
- \_\_\_ e. Name, address, phone number and if available, fax number and e-mail address, of the person(s) erecting the Sign.
- \_\_\_ f. Information concerning required electrical connections.
- \_\_\_ g. Copy of current certificate of general liability insurance where for the site as required by this Ordinance.
- \_\_\_ h. Such other information as the Planning Department may require showing compliance with this Sign Ordinance and any other applicable laws.
- \_\_\_ i. The seal or certificate of a registered structural or civil engineer.
- \_\_\_ j. The zoning district in which the Sign is to be placed.
- \_\_\_ k. A notice stating: "Any change in the information in this Application, such as a change of address, shall be submitted to the Planning Department within 7 days after the change."

6. ADDITIONAL INFORMATION: (2 sets of plans required)

1. All information must be correct, complete, and legible.
2. Separate permit is required for electrical.
3. No work may be started before the approval of this permit. Penalty for work done prior to the issuance of a permit shall double the permit fee.
4. 24 Hours notice is required for inspections

City of Walled Lake, Department of Planning and Development  
Building Permit and Worksheet

5. Stamped Approved plans shall be on site in a readily available and observable location for the inspector to use. If plans are not available inspection will be denied

**PERMIT IS VALID FOR 6 MONTHS.**

**I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent, and we agree to conform to all applicable laws of the City of Walled Lake and the State of Michigan. All information submitted on this application is accurate to the best of my knowledge.**

Section 23a of the State construction code act, P.A. 230 of 1972, as amended, MCL 125.1523A, prohibits a person from conspiring to circumvent the licensing requirement of this State relating in persons who are to perform work on a residential building or a residential structure. Violators of Section 23a are subject to civil fines.

☐

Contractor\*

☐

Property Owner

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

(\*If applicant is NOT property owner, than the property owner must  
sign this application as well.)

\_\_\_\_\_  
Property Owner's Signature

\_\_\_\_\_  
Date

Do not write below this line

\_\_\_\_\_  
**Per all City Codes and Ordinances; the adopted Michigan Residential Code, and the adopted Michigan Building Code.**

**Zoning Review Approved by** \_\_\_\_\_ **Date** \_\_\_\_\_

**Approved by** \_\_\_\_\_ **Date** \_\_\_\_\_