



EAGAN

3830 PILOT KNOB ROAD | EAGAN, MN 55122-1810
(651) 675-5675 | FAX: (651) 675-5694
signpermits@cityofeagan.com

For Office Use

Permit #: _____

Permit Fee: _____

Date Received: _____

Staff: _____

2023 SIGN PERMIT APPLICATION

- ❖ Submit one (1) application per building, pylon or monument sign.
- ❖ Submit one (1) application per pylon or monument sign tenant panel replacement.
- ❖ Submit two (2) copies of drawing showing proposed sign and site plan or building elevation showing location on property.
- ❖ Submit one (1) separate sign plan or letter containing the landlord/building owner's approval of the sign.
- ❖ **Freestanding Signs exceeding 7 feet in height require a Commercial Building Permit.**
- ❖ **Building Signs** – Exposed electrical boxes or conduit shall be shielded from view by painting to match the building or sign band area, or enclosing within the sign raceway. All raceways shall be constructed of materials or painted to match the building or sign band area.
- ❖ **Pylon signs** are a Conditional Use and subject to all conditions, regulations, and fees required for conditional uses.
- ❖ **Temporary Advertising Signs** – Please complete both sides of the application.
- ❖ Applications submitted via email are subject to an additional \$0.25 per page printing charge which will be added to the permit fee.
- ❖ If any sign is placed, erected or installed without first obtaining a sign permit, the permit fee shall be the amount equal to two times the permit fee, per Section 11.70 Subd. 28.1.2

Sign Type	Dimensions of Sign & Sign Message							
	Feet		Inches		Feet		Inches	
<input type="checkbox"/> Awning <input type="checkbox"/> Building <input type="checkbox"/> Canopy <input type="checkbox"/> Construction <input type="checkbox"/> Lease <input type="checkbox"/> Monument <input type="checkbox"/> Pylon <input type="checkbox"/> Temporary <input type="checkbox"/> Other	Length	_____	_____	x Height	_____	_____	x Depth	_____
	Total Square Feet: _____							
	Sign Message: _____							
	Location on Structure: _____						_____ Temporary Use Days	
	Setback: _____						_____ Has Electricity	
	Elevation: _____						_____ Is Double Faced	

Date: ____/____/____ **Applicant is:** ____ Owner ____ Tenant ____ Sign Company / Contractor

Address where sign is to be located: _____

Tenant or Business Name: _____

Tenant Contact Name: _____ **Telephone #:** _____

Email _____

Sign Company / Contractor: _____ **Telephone #:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Email: _____

Property Owner: _____ **Telephone #:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Email: _____

**TEMPORARY SIGN PERMIT
FOR SPECIAL BUSINESS SALES**

Fee: \$25.00

of Signs: _____ (maximum of 3)

Sizes of the Sign(s): 1. _____ 2. _____ 3. _____

- Total Sq. Ft. of all signs: _____ (All 3 signs cannot exceed 100 square feet)

First Day of Placement: _____

- Signs can be placed for 14 days out of a 60-day period which commences the first day a sign is placed.

Sign Permit Expiration Date: _____.

- Sign permit(s) expires 60 days from first day of placement.

14 Days Signs Will Be Placed: _____

Sign(s) will be attached to: _____ building elevation _____ pylon _____ monument _____ free standing

- Signs must be attached to the building or to an existing monument or pylon sign.

Sign(s) will be attached using the following method:

Signs must be placed securely and in a sound manner to ensure safety of the public & in accordance with reasonable standards employed by sign makers.

Person responsible for placement / removal of sign: _____

Telephone #: _____ Email: _____

Management Co. (if applicable) _____ Telephone #: _____

Approval of the building Owner or Management Company may be required. Check your lease or call your Management Company for additional information.

You may subscribe to receive an electronic notification from the City of proposed ordinances by signing up for an email update on the City's website at www.cityofeagan.com/subscribe.

CALL BEFORE YOU DIG. Contact Gopher State One Call at (651) 454-0002 or www.gopherstateonecall.org for protection against underground utility damage. Contact Gopher State One Call 48 hours before you intend to dig to receive locates of underground utilities.

I hereby acknowledge that I have read this application, state the application is correct, and agree to comply with Eagan, MN laws regulating construction and placement.

x _____
Applicant's Printed Name

x _____
Applicant's Signature

FOR OFFICE USE

<u>Work Type:</u>	<u>Description:</u>	<u>Inspections</u>	<u>Fees</u>	
___ Change Existing	___ Aluminum pan	___ F.C.O. Aluminum	___ Footings	\$ _____
___ CUP / Ftg. Ins.	___ Banner	___ Halo-lit / Reverse Channel	___ Final	\$ _____
___ Move	___ Board	___ LED / Electronic	Copies \$0.25/page	\$ _____
___ 60 Days	___ Canister	___ Plastic cutout	TOTAL	\$ _____
___ New	___ Cabinet/Logo	___ Plastic molded		
	___ Channel lit letters	___ Plastic Panel	REVIEWED BY:	
	___ Channel lit / raceway	___ Routed	_____ Planning	
	___ Flex Face	___ Vinyl graphics	_____ Building Inspections	