



# Sign Permit Application

Township of Acme, Grand Traverse County, Michigan

6100 US 31 N, Williamsburg, MI 49690

Phone: (231) 938-1350 Fax: (231) 938-1510 Web: [www.acmetownship.org](http://www.acmetownship.org)  
Planning & Zoning Administrator: Lindsey Wolf Email: [zoning@acmetownship.org](mailto:zoning@acmetownship.org)

Please complete this form & submit to the Acme Township Zoning Administrator with the following items:

- Drawings, to scale showing:**  
Wall-mounted signs:  
 Fully dimensioned building elevation drawings for sides on which sign(s) to be placed, showing all existing and proposed sign placement(s) with dimensions and color drawings of sign copy.  
  
Freestanding signs:  
 Site plan showing all existing and proposed buildings and structures, proposed sign location, accurate distances from lot lines and other structures, full sign support structure and sign face(s) with all dimensions, including gross height and color drawings of sign copy.
- Lighting Plan** - Narrative detailing whether the sign will be internally or externally lighted, the type of lighting to be used, and the proposed hours of illumination.
- Owner Authorization** - if you are not the owner, a letter authorizing you to apply as their agent
- Application fee** - \$50 each sign ; \$20 for temporary signs

Parcel Number: 28-01-\_\_\_\_\_ Property Address: \_\_\_\_\_

Name of Property Owner(s): \_\_\_\_\_

Property Owner's Current Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Description of Sign (attach required drawings): \_\_\_\_\_

**Permanent Sign**       **Temporary Sign - dates requested:** \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Affidavit:** The undersigned affirms that he/she is the \_\_\_\_\_ (owner, agent, lessee, or other interested party) involved in this petition and that the foregoing answers, statements and information are in all respects true and, to the best of his/her knowledge, correct. By making this application, the undersigned grants all officials, staff and consultants of Acme Township access to the subject property as required and appropriate to assess site conditions in support of a determination as to the suitability of the proposed project and/or current of future sign permit and zoning ordinance compliance.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### FOR TOWNSHIP USE ONLY

\_\_\_\_ The proposed sign is permitted by the Acme Township Zoning Ordinance of 2022 as amended

\_\_\_\_ The proposed sign has be approved as a special condition by the Zoning Board of Appeals (ZBA)

↳ Date: \_\_\_\_\_ ZBA Application #: \_\_\_\_\_

Application #: \_\_\_\_\_ Date Filed: \_\_\_\_\_ Fee Paid: \_\_\_\_\_

Total Temporary Signage Days: \_\_\_\_\_ Temporary Sign Expiration Date: \_\_\_\_\_