Remarks:

_ 1380 Permit #PRSGN SIGN PERMIT APPLICATION Project Business Name: Project Address/Location: Applicant: Luminous Neum Applicant's Address: Applicant's Phone & Fax #: 913.238,9917-Shelly Coll Applicant's Email Address: Spoppelreitereluminousneon. Com Type of Sign: Check only one Wall Sign (\$100) (novth - taylore | Temporary Sign (\$50) /etters only) Monument/Detached Sign (\$100) Directional Sign (\$50) Illumination: Specify whether the sign is illuminated Non-Illuminated Illuminated * *NOTE: IF BRANCH CIRCUIT IS NOT CURRENTLY AVAILABLE FOR ILLUMINATED SIGN, A LICENSED ELECTRICAL CONTRACTOR MUST OBTAIN ELECTRICAL PERMIT PRIOR TO INSTALLATION. ALL SIGNS INVOLVING INTERNAL LIGHTS OR OTHER ELECTRICAL DEVICES OR CIRCUITS SHALL DISPLAY A LABEL CERTIFYING IT AS BEING APPROVED BY THE Height of sign: 2101 ft (X) Width of sign: 72' 7/ft (=) Area of sign: 205. 71 sq ft SIMI.

Area of building façade/wall: 6490-75 sq ft Total height of detached sign: Setbacks: front property line: _____ft rear property line: _ side property line: side property line: ____ The applicant understands that this permit is issued only for work described here in and included in accompanying plans and specifications. All rights and privileges acquired under the provisions of this Ordinance, or any application thereto, are merely licenses revocable at any time by the Director of Development Services Department. Signature of Applicant Date For City use only, do not write below this line. Zoning: PMIX Permit Fee: \$100 Electrical Permit Required: ☐ Yes □ N/A No Receipt #: Planning Division Approval Approved: _ Date Signature of Plans Examiner



SIGN PERMIT AUTHORIZATION

COMOS DOWN SAUNT	
Comes now (landlord or property owner)	, who being
duly sworn upon his/her oath, does state that he/she is the landlord or prope	rty owner that has
given permission to the applicant to place signage at: 800 NE	lones
Industrial Dr. Lee's Summit	MO 54086
(location address)	
Dated this	er
Printed Name	