

Permit # PRSGN	
SIGN PERMIT APPLICATION	
Project Business Name: Freezing MOO	
Project Address/Location: 1099 NW Blue Parkway	
Applicant: Schurle Signs, Inc.	
Applicant's Address: 1837 E 1450 Rd, Lawrence, KS 66044	
Applicant's Phone & Fax #: <u>785-832-9897</u>	
Applicant's Email Address: Macy@SchurlesignS.com	
Type of Sign: Check only one	0
🗹 Wall Sign (\$100)	Monument/Detached Sign (\$100)
Temporary Sign (\$50)	Directional Sign (\$50)
Illumination: Specify whether the sign is illuminated	
🖾 Illuminated *	Non-Illuminated
*NOTE: IF BRANCH CIRCUIT IS NOT CURREN LICENSED ELECTRICAL CONTRACTOR MUST INSTALLATION. ALL SIGNS INVOLVING INTERNA CIRCUITS SHALL DISPLAY A LABEL CERTI UNDERWRITER'S LABORATORIES, INC.	OBTAIN ELECTRICAL PERMIT PRIOR TO
Sign Dimensions and Setbacks for Wall and Monument/Detached Signs	
Height of sign:ft (X) Width of sign: _	<u>0'-8'2''</u> ft (=) Area of sign: <u>40.25</u> sq ft
Area of building façade/wall: 457.2 sq ft	Total height of detached sign: ft
Setbacks: front property line: ft	rear property line: ft
side property line: ft	side property line: ft
The applicant understands that this permit is issued only for plans and specifications . All rights and privileges ac application thereto, are merely licenses revocable at any tim	equired under the provisions of this Ordinance, or any
1 JUS BOUM 90/JUL Gignature of Applicant	9/25/80 Date
For City use only, do not write below this line.	
Electrical Permit Required:	Zoning: <u>CP-2</u> Permit Fee: <u>\$100</u>
	Receipt #:
	Approved:
Signature of Codes Administration Plans Examiner	Planning and Codes Administration Date
<u>Remarks:</u>	

B LEE'S SUMMIT MISSOURI

SIGN PERMIT AUTHORIZATION

, who being TERRI A DAVIS (landlord or property owner) Comes now duly sworn upon his/her oath, does state that he/she is the landlord or property owner that has

duly sworn upon his/her oath, does state that he/she is the landlord or property owner that has $\langle gg NW \rangle T S L US P K W \rangle$ given permission to the applicant to place signage at US S S UM V T M D G 4 D S G. (location address)

25th day of September, 20 20 Dated this

Signature of Landlord or Property Owner

DANK

Printed Name

Revised February 2014

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