

City of Lee's Summit

Department of Planning and Development

Phone: (816) 969-1600 Fax: (816) 969-1619

Permit # **PRSGN** 2020 - 3545

SIGN PERMIT APPLICATION

Project Business Name: Home Goods

Project Address/Location: 492 NW Chipman Rd

Applicant: Ashley Ramos - Midwest Sign Company

Applicant's Address: 550 Stanley Rd Kansas City, KS 66115

Applicant's Phone & Fax #: 620-332-9223 direct 816-866-7446 main office

Type of Sign: Check only one

- | | |
|--|--|
| <input type="checkbox"/> Wall Sign (\$100) | <input checked="" type="checkbox"/> Monument/Detached Sign (\$100) |
| <input type="checkbox"/> Temporary Sign (\$50) | <input type="checkbox"/> Directional Sign (\$50) |

Illumination: Specify whether the sign is illuminated

- | | |
|---|--|
| <input checked="" type="checkbox"/> Illuminated * | <input type="checkbox"/> Non-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 UNDERWRITER'S LABORATORIES, INC.

Sign Dimensions and Setbacks for Wall and Monument/Detached Signs

Height of sign: 1.97 ft (X) Width of sign: 7 ft (=) Area of sign: 13.8 sq ft

Area of building façade/wall: _____ sq ft Total height of detached sign: 17.33 ft

Setbacks: front property line: 25 ft rear property line: 860 ft

side property line: 25 ft side property line: 1135 ft

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 Planning and Development of the Director of Codes Administration.

Ashley Ramos
Signature of Applicant

10/06/2020
Date

For City use only, do not write below this line.

Electrical Permit Required:
☐ N/A ☐ Yes ☐ No

Zoning: PMIX Permit Fee: \$100

Receipt #: _____

Signature of Codes Administration Plans Examiner

Approved: _____
Planning and Development Date

Remarks: