

Permit #PRSGN \_\_\_\_\_ - \_\_\_\_\_

### SIGN PERMIT APPLICATION

Project Business Name: Let's Face It

Project Address/Location: 415 SW Jefferson St., Lee's Summit, MO 64063

Applicant: FASTSIGNS

Applicant's Address: 17331 E US Hwy 40 Suite 104, Independence, MO 64055

Applicant's Phone & Fax #: 816-252-0909

Applicant's Email Address: 223@fastsigns.com

#### 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 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.

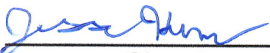
#### Sign Dimensions and Setbacks for Wall and Monument/Detached Signs

Height of sign: 4 ft (X) Width of sign: 5 ft (=) Area of sign: 20 sq ft

Area of building façade/wall: \_\_\_\_\_ sq ft Total height of detached sign: 5 ft

**Setbacks:** front property line: 11 ft rear property line: 170 ft  
side property line: 17 ft side property line: 45 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 Development Services Department.

  
\_\_\_\_\_  
Signature of Applicant

10/5/2021  
\_\_\_\_\_  
Date

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

Electrical Permit Required:  
 N/A     Yes     No

Zoning: \_\_\_\_\_ Permit Fee: \_\_\_\_\_

Receipt #: \_\_\_\_\_

\_\_\_\_\_  
Signature of Plans Examiner

Approved: \_\_\_\_\_  
Planning Division Approval    Date

#### Remarks:

Project Address