



# CITY OF MISHAWAKA-PLANNING DEPARTMENT

## SIGN IMPROVEMENT LOCATION PERMIT APPLICATION

PROJECT ADDRESS \_\_\_\_\_ PROJECT NAME \_\_\_\_\_

LEGAL DESCRIPTION \_\_\_\_\_

TAX KEY NUMBER (S) \_\_\_\_\_

PROJECT TYPE (check one):  Commercial  Industrial  Institutional  Residential

ZONING: R-1 R-2 R-3 R-4 C-1 C-2 C-3 C-4 C-5 C-6 C-7 C-8 C-9 C-10 I-1 I-2 S-1 S-2

PROJECT START DATE: \_\_\_\_\_ ESTIMATED PROJECT COMPLETION DATE: \_\_\_\_\_

SIGN COMPANY & CONTACT PERSON \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

PROPERTY OWNER(S) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

ON SITE BUSINESS MANAGER \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

(1) Sign Company Bonded with City of Mishawaka Yes \_\_\_\_\_ No \_\_\_\_\_

(2) Lot Frontage (Required for Freestanding Permanent Signs) \_\_\_\_\_ linear feet

(3) Proposed Sign Type(s) \_\_\_\_\_ Freestanding Sign \_\_\_\_\_ Facade Sign \_\_\_\_\_ Temporary Sign  
\_\_\_\_\_ Directional Sign \_\_\_\_\_ Awning Sign

(4) Please Complete the Appropriate Letter(s)

(a) **ALLOWED** Size of Freestanding Sign

Height \_\_\_\_\_ FT  
Display Area \_\_\_\_\_ SF  
Copy Area \_\_\_\_\_ SF

(b) **EXISTING** Freestanding Signs(s)

Yes \_\_\_\_\_ No \_\_\_\_\_ # \_\_\_\_\_

Sign 1

Height \_\_\_\_\_ FT  
Display Area \_\_\_\_\_ SF  
Copy Area \_\_\_\_\_ SF

Sign 2

Height \_\_\_\_\_ FT  
Display Area \_\_\_\_\_ SF  
Copy Area \_\_\_\_\_ SF

If more than 2, please document on back of page

(c) **PROPOSED** Freestanding Sign(s)

Sign 1 Height \_\_\_\_\_ FT  
Display Area \_\_\_\_\_ SF  
Copy Area \_\_\_\_\_ SF

Sign 2

Height \_\_\_\_\_ FT  
Display Area \_\_\_\_\_ SF  
Copy Area \_\_\_\_\_ SF

Sign 3

Height \_\_\_\_\_ FT  
Display Area \_\_\_\_\_ SF  
Copy Area \_\_\_\_\_ SF

If more than 3, please document on back of page

PROJECT ADDRESS \_\_\_\_\_ PROJECT NAME \_\_\_\_\_

(d) **Total Square Feet of ALL Proposed Façade/Wall/ Awnings Signs** \_\_\_\_\_ SF

Sign 1 \_\_\_\_\_ SF Sign 2 \_\_\_\_\_ SF Sign 3 \_\_\_\_\_ SF

Sign 4 \_\_\_\_\_ SF Sign 5 \_\_\_\_\_ SF Sign 6 \_\_\_\_\_ SF

(e) **Number and Size of Directional Signs**

Number \_\_\_\_\_ Height \_\_\_\_\_ Area \_\_\_\_\_ Square Feet

Note: Directional signs shall not exceed eight (8) square feet in area and/or three and one-half (3 1/2) feet in height. There shall be no more than two (2) directional signs per curb cut.

**Signs:** Permits for signs will only be issued to contractors licensed and bonded within the City of Mishawaka. To apply for a sign permit you must provide drawings or otherwise certify the following as applicable: the location and size of existing signage to remain, existing signage to be removed, and the location and size of proposed signage. All applications for sign permits must include a **color** elevation drawing of the proposed signs. For non-façade signs, a plan drawing showing the entire property boundary (include distances), right-of way locations, entry drives, utilities, and the location of both existing and proposed signage. **\$25.00 (Temporary Signs \$25.00)**

**Failure to provide required information will result in delays or denial of permit.**

This application is for a Sign Improvement Location Permit (SILP) ONLY from the Planning Department. A Building Permit is also required from the City of Mishawaka Building Department located at Mishawaka City Hall, Room 101, 600 E. Third Street, Mishawaka, IN Please call (574) 258-1607 to confirm Licensing, Bonding and Permit Fees in the Building Department.

The undersigned hereby certifies that the statements contained herein, including any and all attachments, are true and correct and in consideration of granting of the permit, agrees to save the City of Mishawaka harmless from any and all damages and agrees to perform the work covered by this permit in conformity with the Ordinances of the City of Mishawaka, Indiana.

\_\_\_\_\_  
*Signature of Applicant/Person Securing SILP*

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

**THIS PERMIT IS VALID FOR ONE (1) YEAR FROM THE DATE OF APPROVAL**