



City of Larned
Building Inspections
417 Broadway
Larned, Kansas 67550
(620) 285-8500

Sign Permit Application

Application Date _____

Required Documents:
 Site Plan
 Sign Specs / Details

Property Information

Street Address	City	State	Zip	Zoning
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Owner Information

First Name	Last Name	Phone	
Street Address	City	State	Zip

Contractor Information

Sign Installer	Phone
Electrical Contractor	Phone

Project Information

Project Description					
Sign Text					
Construction Type			Frame Type		
Sign Dimensions	Existing Square Footage	Number of Sides		One	Two
Distance from Curb to Property Line	Distance Lower Edge Above Grade	Projection Distance from Building		Projection Beyond Property Line	
Electrician Required?	Construction Cost	Expected Completion Date		Attached	Yes No
Yes No				Illuminated	Yes No

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent. I also certify that the information provided is correct and that I will comply with all zoning regulations, as well as all City, State and Federal requirements. A permit issued upon false statement of any fact, which is material to the issuance of a permit, shall void said permit. Permits and/or Certificates of Occupancy, when issued, DO NOT NULLIFY ANY DEED RESTRICTIONS OR EASEMENTS VALIDLY FILED OF RECORD. In addition, I agree to install appropriate erosion control measures in order to avoid dirt, sand and other material from accumulating within public street right-of-ways. I also agree that if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Signature of Applicant	Date
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Office Use Only
Permit Fee \$ _____ Permit # _____ Permit Issue Date _____