



PERMIT APPROVAL

By: _____

Date: _____

Permit # _____

TEMPORARY SIGN PERMIT APPLICATION

Start Date: _____ End Date: _____

APPLICANT: _____

Address: _____

Phone: _____ Email: _____

INSTALLER: _____

Address: _____

Phone: _____ Email: _____

SIGN LOCATION: _____

** Sign must be located on private property. Sign should not be in visibility triangle at corners or entrances**

NAME OF BUSINESS: _____

SIGN SIZE: *Sign cannot exceed 32 square feet*

_____ HEIGHT _____ WIDTH _____ NUMBER OF SIDES

Make check payable to the City of Waite Park

Fee: \$30.00

Applicant Signature: _____

Date: _____

Submit Completed Applications to:

Waite Park City Hall
19 – 13th Ave N
PO Box 339
Waite Park, MN 56387
Monica.Reese@ci.waitepark.mn.us
Phone: 320-656-8936 Fax: 320-252-6955