

SIGN APPLICATION

Village of Lake Isabella Zoning Administrator
1010 Clubhouse Drive
Lake Isabella, MI, 48893
989-644-8654(Phn) 989-644-3327 (fax)
office@lakeisabellami.org

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office@fakefsabeffamf.org			ree Paid:	
Applicant		Cor	Contractor	
NAME:		NAME:		
MAILING ADDRESS:		MAILING ADDRESS		
DLIONE.		DHONE.		
PHONE:		PHONE:		
TITLE		TITLE		
Signature/Date		Signature/Date		
		ereby request a permit for the p location, and as shown on the a		
Township:	Section:	Plat:	Lot:	
		Plat:Zoi		
		Plat:Zon ☐ Business/Commercial		
Street Address: Purpose: ☐ Home Occupat	ion	Zoi	ning District:	
Street Address: Purpose: ☐ Home Occupat	ion	Zon □ Business/Commercial	ning District:	
Street Address: Purpose:	ion	Zon □ Business/Commercial	ning District:	
Street Address: Purpose:	ion	□ Business/Commercial □ Plastic	ning District:	

Approved:_____ Timothy R. Wolff, Lake Isabella Zoning Administrator

Date:

(Permit Expires One Year after Date of Approval)



SIGN DRAWING AND SITE PLAN

Site Plan of the Prope	rty Sign Drawing	
Height of Sign from	Existing Ground Grade:	
Type of Landscapin	ng Used:	
Any and Type of Ill	umination:	
Sign Dimensions:		
that you use plywood sheets to done to the surface or edges of	r any type of heavy equipment entering or exiting your lo protect the edges of the surface of the roadway. Any da the roadway will be the responsibility of the Applicant to se Isabella Street Administrator.	amage
	OFFICIAL USE ONLY Timothy R. Wolff, Village of Lake Isabella Zoning Administrator	-
	(Permit expires one year after approval)	
Parmit #	Applicant	
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