

City of Collins Sign Permit Application



Job Address: _____

Owner: _____ Phone: _____

Sign Contractor: _____ Phone: _____

Designer: _____

Plans Attached: Yes No

Work To Be Done In			
New		Repair	
Addition		Move	
Alteration		Other	

Type of Work			
Double Faced		Non-Illuminated	
Single Faced		Illuminated	

Colors: _____

Detailed Explanation: _____

Contractor Signature: _____

Date: _____

Application Received By: _____

Date: _____

Public Works Director: _____

Date: _____

Permit Fee: \$ _____