



Development Services Department
 201 1st Ave E.
 Kalispell, MT 59901
www.kalispell.com

SIGN PERMIT APPLICATION

Phone: (406) 758-7940

planning@kalispell.com

FAX (406) 758-7739

**** ALL BLOCKS ARE REQUIRED INFORMATION (Incomplete apps will delay review)****

Job Site Address (address where sign will be installed)

Kalispell

MT

59901

PROPOSED SIGNAGE

Sign Type (wall, freestanding, etc.)	Size per Face (Sq.Ft.)	Height above Grade		Value of Sign	Notes	Office Use
		Low Point	High Point			
Street Frontage (Feet)				Building Frontage (Feet)		

Business Owner _____ **Business Owner Phone** _____

Business Owner Address _____ **City, State, Zip** _____

Business Owner Email Address _____

Sign Contractor Name _____ **Sign Contractor Phone** _____
 N/A

Sign Contractor Address _____ **City, State, Zip** _____

Sign Contractor Email Address _____

Point of Contact for Plan Review Comments

Name _____ **Phone** _____

Email address _____

Submittal Requirements (All Signs)

1. Site Plan indicating location of each proposed sign, as well as the location & size (square feet) of each existing sign.
2. Dimensioned drawing of proposed signage including color, material, structural supports & electrical/lighting components.

Submittal Requirements - Architectural Review (All signs except wall signs)

2nd & 4th Tuesday of each month @ 7:30am - First Floor Conference Room - City Hall building

1. Photos of colors/materials should be included with the PDF/electronic submittal. Actual physical samples of the materials & colors to be presented at meeting.
2. Photos of the site and neighborhood context, these photos are recommended.
3. Plans shall be submitted as PDF's (electronic plans) for review.
4. Plans shall be submitted no later than the Monday of the week prior to the scheduled meeting date. Attendance at the meeting is strongly encouraged.

Consent to Inspect

I understand that the codes adopted by the City of Kalispell provide for the entry onto and inspection of my property in conjunction with the applicable permit.

By applying for and receiving a permit, I understand that I am consenting to such entries/inspections until such time as the project has passed a final inspection.

Furthermore, I hereby explicitly give my consent to allow employees of the City of Kalispell, including, but not necessarily limited to, the zoning administrator and Planning Department staff, to enter and inspect my property (located at the listed address) for purposes related to my permit.

My consent to enter and inspect extends not only to the land itself, but also to all buildings, structures, and other fixtures on the lot. I understand that an inspection may entail reasonable measures to determine compliance with the applicable code/ordinance and may include, but is not necessarily limited to, uncovering or removing material concealing relevant construction.

Acknowledgments

The issuance or granting of a permit or approval of plans, specifications and computations shall not be construed to be a permit for, or an approval of, a violation of any of the provisions of the International Building, Residential, Mechanical, Fire, National Electrical Code, Energy Code or the Uniform Plumbing Code; the Kalispell Zoning Ordinance; the Kalispell Municipal Code; or any other ordinance, code or law of the City of Kalispell, County of Flathead, State of Montana, of the Federal Government or any of their agencies.

I understand that information provided to the City of Kalispell, whether on a permit application form or during the permit process, is part of the public record and that the following policies/procedures apply: The information is available for viewing by any member of the public upon request; the permit and its associated information will be posted on site in public view during construction; any individual may compile a mailing list by examining the records that are otherwise open to public inspection; and permit information is regularly made available to requesting agencies, businesses and the public.

By my signature, I certify that I have read and understand the above statements.

Signature of owner or authorized agent

Print Name

Date