

Sign Permit Application
Town of Lakewood

3110 Strand Road / Duluth, MN 55803
218-606-6972 / email: zoning.lakewoodmn@gmail.com

Please complete the application in triplicate. Be sure to provide all required information. Incomplete applications will be returned and will result in a delay of the issuing of your sign permit. The sign application must be accompanied with the required fee.

Sign Applicant's Information:

Name of Applicant: _____

Mailing Address: _____

E-Mail Address: _____

Phone Number: Home: _____ Work: _____ Cell: _____

Authorized Contact: _____

Mailing Address: _____

Property Owner's Information:

If the sign is not placed on the land of applicant please provide the following:

Name of Property Owner: _____

Mailing Address: _____

E-Mail Address: _____

Phone Number: Home: _____ Work: _____ Cell: _____

Applicant Signature Printed Name Date

I, the property owner listed herein agree to allow said applicant to place one sign on my private property indicated herein.

Owner Signature (If applicant is not the owner) Printed Name Date

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Sign Location Information:

Zone district sign will be located: _____

Parcel Code ID#: _____

Legal Description of Parcel:

Highway, Road, Intersection or Address of sign's location:

Description of Sign:

Purpose of Sign: (check all that apply)

☐ Directional

☐ Church

☐ Public School

☐ Informational

☐ Election

☐ Home Business

☐ Commercial

☐ Private

☐ Temporary

☐ Community or Government Bldg.

Describe Sign:

Sign's Surface Area: _____ sq. ft.

Sign's Dimensions (feet): _____

Sign's Total Height: _____ ft. _____ x _____
(Above Ground) Height Width

How many sides will the sign have? _____

Distance from Road Right-of-Way: _____ ft.

Will the sign have lighting: _____ Yes _____ No

Is sign currently displayed: _____ Yes _____ No

If yes, when was the sign placed at this location: _____
mm/dd/yyyy

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Attach design documentation of sign (example: photos, drawings, material samples, ect.).

Please note all signs for commercial purposes in the Town of Lakewood, MN, St. Louis County are governed by, and must adhere to the standards in Article VI, Section 17 of the Lakewood Zoning Ordinance. The Ordinance should be referenced prior to making this application and erecting any sign. It can be found at www.lakewoodtownshipmn.org. Applications which are incomplete shall not be accepted. Remember your Permit ID Number must be displayed with 3/4:" symbols in the lower right-hand corner of the front of the sign. Permits expire ten (10) years after the date of issuance and must be renewed one (1) month to expiration.

I, herein agree by the signature below that all information provided herein is true and correct; that I have reviewed the sign ordinance for the Town of Lakewood and that the sign herein permitted shall comply with said ordinance.

Print Name

Signature of Applicant

Date

Office Use Only

Permit Fee: current fee schedule (10 year permit fee)

Sign Permit ID Number: _____

Date of Issue: _____

Renewal Date: _____

Receipt Number: _____

Receipt Date: _____

Signature of Zoning Administrator
