CITY OF ST. PAUL

DEPARTMENT OF SAFETY AND INSPECTIONS
375 JACKSON STREET, SUITE 220
ST. PAUL, MINNESOTA 55101-1024

SIGN PERMIT APPLICATION

Visit our Web Site at **www.stpaul.gov/dsi**

	Number Street Name St. Ave. Blvd. Etc.	N S E W	Suite/Apt	Building Name	Date
PROJECT ADDRESS					

Sign Contractor (Include Contact Person)	Address City State, Zip+4	Phone
Contractor's Email:		
Business / Owner (Include Contact Person)	Address City State, Zip+4	Phone

Type of Sign	**Type of Work**	Est. Start Date	Est. Finish Date	Est. Project Value
Business ☐ Off-premise Advertising (Include City Ref #) ☐ #_____	New ☐ Replace ☐ Repair ☐ Demo ☐			

Notice: A Site Plan and a Drawing of each sign must accompany this permit application.

Place X or check mark in square next to sign type. Enter number of signs of selected type, width & length in feet & inches, and total square feet of sign. Use additional columns for signs of different sizes or list in the **Description of Project** box.

Wall ☐	Wall ☐	Wall ☐	Wall ☐
Projecting ☐	Projecting ☐	Projecting ☐	Projecting ☐
Free Standing ☐	Free Standing ☐	Free Standing ☐	Free Standing ☐
Roof ☐	Roof ☐	Roof ☐	Roof ☐
Quantity	Quantity	Quantity	Quantity
Width	Width	Width	Width
Length	Length	Length	Length
Sq. Feet	Sq. Feet	Sq. Feet	Sq. Feet

Is an Awning included in this permit? Yes ☐ Projection away from Building (ft/in) ____ Structure Size: Height Length (Awning)

	(Sq. Feet)
Total existing signage on this property before project begins	
Signage to be removed from property	
Total signage proposed for this project	
Total signage on property After work is completed	

Lot Dimension Width Length	Street Frontage (Number of Feet)

Is the Sign located on a Corner Lot? Yes ☐ No ☐

Is the Sign in a Shopping Center/Mall or Multi-Tenant Bldg? Yes ☐ No ☐

Does the Sign project over Public Right of Way ? Yes ☐ No ☐

If Yes, a Certificate of Insurance may be required, Call 651-266-9080.
Enter Amount of Projection over Public Right of Way (inches) :

A separate electrical permit is REQUIRED for any illuminated or electrical sign. **State electrical contractor performing work:**

Copy to Read / Description of Project :

PORTABLE SIGNS ☐	**How Many ?**	**Total Square Feet**	**Sign Dimensions** **Width Length Height**

Applicant certifies that all information is correct and that all pertinent state regulations and city ordinances will be complied with in performing the work for which this permit is issued.

Applicant's Signature: _____ **Date:** _____

SUMMARY OF FEES	
Sign Permit Fee	$
Special Sign District Fee	$
State Surcharge	$
Total Permit Fee	$

OFFICE USE ONLY	**PERMIT #** →	
Zoning Remarks :	**Certificate of Insurance** ☐	**Zoning District :**
Structural / Plan Review Remarks:		**PIN** **Allowable Signage:** **Review By** **Date**

Would you like your permit faxed to you? If Yes, Enter your fax # with area code below :

( ) -

Signature of Cardholder (required for all charges): _____

☐ AMEX ☐ Discover ☐ MasterCard ☐ Visa	**Security Code ►**					**Expiration Month /Year ►**				
Enter Account Number ►					—					—					—				

If you are paying for your permit by *American Express, Discover, MasterCard* or *Visa,* you may fax your application.
The credit card information section must be filled in and signed.
Our FAX number is 651-266-9124.
If paying by check, please mail the application and the check to us. Make checks payable to: City of St Paul

INSTRUCTIONS FOR SIGN PERMITS

Effective 02/14/2015

OTHER REQUIREMENTS

A site plan drawing must be submitted with each application stating the following information (some special sign districts require scaled drawings):

1. All lot dimensions, including street frontage(s). Corner lots must be indicated.
2. Location of structure(s).
3. Street and alley locations.
4. Include the type, size, height, and location of the proposed sign(s), and a rendering of the sign(s) showing their copy and dimensions.
5. If sign projects over public property, indicate its height, ground clearance, and amount of projection into the public right-of-way.
6. Freestanding and Roof Signs larger than 50 square feet require structural plans.
7. Modifications made to buildings to accommodate a sign installation require a separate building permit.
8. For any work involving Nonconforming Signs (excluding demolition work), include a certified survey stating the location, size, and height of the existing and proposed repaired or replacement sign.
9. For Wall Signs, include a picture or detailed rendering of the building showing where the sign will be located.
10. For Advertising Signs, include a signed lease agreement.
11. For Portable Signs, include the name and address of the company the sign is being rented from.

FEES:

Type I – Wall and Projecting Signs:	**$2.60 for each square foot with a minimum fee of $70.00**
Type II- Roof and Freestanding Signs:	**$2.70 for each square foot with a minimum fee of $75.00**
Type III- Temporary and Portable Signs:	**$70.00**
Type IV – Awnings:	**$2.10 per linear foot with a minimum fee of $70.00**
Type V – Demolition of Signs:	**$70.00**
Type VI – Repair Existing Signs:	**25% of the fee for a new or replacement sign, with a minimum fee of $70.00**
Type VII – Marquee over public property:	**$138.00**

SURCHARGES:

Special Sign District Fee:	**$25.00**
State Surcharge:	**$1.00 per permit application w/fee less than $10,010.00. If fee is greater than or equal to $10,010.00, then surcharge is calculated by multiplying fee by .0005 (applicable only to signs attached to buildings and is per application not per sign)**

Any sign which projects beyond 15" into a public right-of-way requires a certificate of insurance.
Call 651-266-9080 for information.

FOR INFORMATION ON SIGN PERMITS CONTACT ZONING AT 651-266-9080

APPROVAL AREA {For Office Use Only}			
OFFICE	**REQUIRED**	**APPROVAL NUMBER**	**DATE/REMARKS/INITIALS**
Heritage Preservation Commission (HPC)			
Special Sign District			

****Inspectors are in the office for inspection requests between 7:30 AM – 9:00 AM, Monday – Friday****
Inspectors' Phone Number is 651-266-9002
To Contact Zoning, Call 651-266-9080

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