

**CITY OF HAYSVILLE**

PO Box 404  
200 W. Grand  
Haysville, KS 67060  
Phone: 316/529-5900 | Fax: 316/529-5925  
[www.haysville-ks.com](http://www.haysville-ks.com)

**Permanent Sign  
Permit Application****PERMIT APPROVAL REQUIRED BEFORE STARTING ANY WORK.****PROJECT INFORMATION**

Project Address:	
Use of Building: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Public	
Contractor Name:	Contractor License #:
Contractor Address:	Contractor Phone:
Subcontractor(s):	

**BUSINESS/ORGANIZATION INFORMATION**

Business Name:	Business Phone:
Business Physical Address:	
Business Mailing Address:	

**PROPERTY OWNER INFORMATION**

Property Owner Name:	Property Owner Phone:
Property Owner Mailing Address:	

**DESCRIPTION OF SIGN**

Class of Work: <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Major Repair	
SignType (Mark all that apply): <input type="checkbox"/> Center Identification <input type="checkbox"/> Electronic Message Center <input type="checkbox"/> Awning <input type="checkbox"/> Canopy <input type="checkbox"/> Marquee <input type="checkbox"/> Freestanding <input type="checkbox"/> Wall <input type="checkbox"/> Roof <input type="checkbox"/> Billboard <input type="checkbox"/> Projecting <input type="checkbox"/> Off Premises <input type="checkbox"/> Illuminated <input type="checkbox"/> Indirectly Illuminated <input type="checkbox"/> Not Illuminated <input type="checkbox"/> Single Sided <input type="checkbox"/> Double Sided	
Height to Top of Sign:	Height to Bottom of Sign:
Sign Dimensions: _____ x _____	Total Gross Surface Area of Sign:

**AN INSPECTION IS REQUIRED WHEN THE SIGN INSTALLATION IS COMPLETE.**

**APPLICANT MUST INCLUDE:**

- ☐ Quote indicating the project cost.
- ☐ A site plan which depicts the location of the proposed sign and includes:
  - ☐ Property lines;
  - ☐ All existing Signs;
  - ☐ Distances; and
  - ☐ Separations.
- ☐ A drawing of the sign which depicts:
  - ☐ Dimensions;
  - ☐ Area;
  - ☐ Distance from ground to lower edge of sign;
  - ☐ Electrical requirements; and
  - ☐ Anchor method.
- ☐ Payment of the \$75.00 fee.

I/We, the undersigned hereby certify that I/we have examined this application and know the same to be true and correct. All provisions of laws and ordinance governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

\_\_\_\_\_  
(Print) Name of Contractor

\_\_\_\_\_  
Signature of Contractor

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Print) Name of Owner

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

OFFICE USE ONLY				
Date/Time Application Received: _____		Fee: _____		Receipt #: _____
	Approved	Disapproved	Reason	Date
Building Inspector				
Zoning Administrator				
Permit #: _____		Date Issued: _____		
Final Inspection by: _____		<input type="checkbox"/> Approved <input type="checkbox"/> Denied		Date: _____
Notes: _____				