

CITY OF ROCKFORD

6031 Main St

Rockford, MN 55373

763-477-6565

763-477-4393 FAX

www.cityofrockford.org

SIGN APPLICATION

Name of applicant: _____

Name of Property owner: _____

Address of sign: _____

Size of Sign: _____

Height of Sign: _____

Sign Materials: _____

Signature of applicant: _____

Signature of property owner: _____

Site plan submittal check list is attached. All required documents for site plan review shall be submitted with this application including the \$5.00 temporary sign fee.

Office Use Only

____ site plan submitted

____ Fee submitted

_____ Staff signature

Date submitted: _____