City of Edina
Community Development
Planning Division
4801 West 50th Street*Edina, MN 55424
(952) 826-0369 Fax (952) 826-0389 TDD (952) 826-0379
EdinaMN.gov

Permit #_____
Date_____
Fee Paid_____
Office Use Only

SIGN PERMIT APPLICATION - PAPER SUBMITTALS ONLY

ADVERTISEMENT: _____

SIGN ADDRESS: _____

Sign Owner: Name: _____ Phone: _____

Address: _____City:_____State:_____Zip:_____

Email: _____

Property Owner: Name: _____ Phone: _____

Address: _____City:_____State:_____Zip:_____

Email: _____

Sign Company: Name: _____ Phone: _____

Address: _____City:_____State:_____Zip:_____

Email: _____

Electrical Contractor: _____Phone:_____

Email: _____

Type of Sign: ☐ Wall ☐ Freestanding

Wall: Dimension of Sign* _____X_____=0.00_____sq. ft.

Dimension of Wall†_____X_____=0.00_____sq. ft.

Illumination: ☐ None ☐ Internal ☐ Indirect

Freestanding: Dimension of Sign*_____X_____=0.00_____sq. ft.

Height*_____ Setback‡ _____

Illumination: ☐ None ☐ Internal ☐ Indirect

* A scale drawing of the sign
† An elevation drawing showing the dimensions of the wall
‡ Site plan showing the proposed setbacks from lot lines and drive aisles
NOTE: A building permit is required for all new pylon or monument signs, and wall signs subject to wind loads.

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

Applicant's printed or typed name: _____