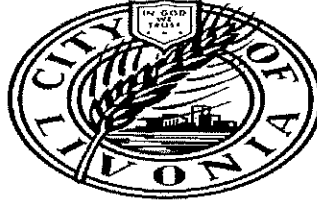


PERMIT #: \_\_\_\_\_

FOR SIGNAGE REFER PERMIT # \_\_\_\_\_

**CITY OF LIVONIA  
INSPECTION DEPARTMENT**



33000 Civic Center Drive Livonia, MI 48154  
734-466-2580 734-466-2095 FAX

**FIXED AWNING PERMIT APPLICATION**

AWNING CONTRACTOR: \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

JOB ADDRESS \_\_\_\_\_

OWNER OF BUILDING \_\_\_\_\_

OCCUPANT (NAME OF BUSINESS): \_\_\_\_\_

Number to be erected: \_\_\_\_\_

Length of Awning: \_\_\_\_\_ Feet      \_\_\_\_\_ Feet      \_\_\_\_\_ Feet

Length of Awning: \_\_\_\_\_ Feet      \_\_\_\_\_ Feet      \_\_\_\_\_ Feet

Location On Building: \_\_\_\_\_

Projection Over Public Sidewalk: \_\_\_\_\_ Feet

Material of Framework: \_\_\_\_\_

Under clearance: \_\_\_\_\_ Feet

Material of Covering: \_\_\_\_\_

Graphics, Lettering or Signage on Awning  YES  NO

Projection from Building: \_\_\_\_\_ Feet

Type of Illumination: \_\_\_\_\_

Distance from Building to Curb: \_\_\_\_\_ Feet

**APPLICANTS**

SIGNATURE/TITLE \_\_\_\_\_ DATE: \_\_\_\_\_

**NOT TO BE FILLED IN BY APPLICANT**

ZONING DISTRICT: \_\_\_\_\_ SECTION NO. \_\_\_\_\_ ZG: \_\_\_\_\_ PC: \_\_\_\_\_ CR: \_\_\_\_\_

REMARKS \_\_\_\_\_

ZONING APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_ AWNING PERMIT FEE: \$ \_\_\_\_\_

STRUCTURAL APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_ PLAN REVIEW FEE: \_\_\_\_\_

ADMIN FEE: \_\_\_\_\_

TOTAL FEE: \_\_\_\_\_