

DIVISION OF BUILDINGS & SAFETY ENGINEERING  
CITY OF WARREN  
MACOMB COUNTY, MICHIGAN

Sign Erector's Registration Number \_\_\_\_\_  
Last Year's Registration Number \_\_\_\_\_

Date: \_\_\_\_\_  
Registration Fee \$\_\_\_\_\_

New ( ) Renewal ( )

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Do not write above this line

I hereby apply for registration to erect, construct, repair or maintain signs or display structures within the City of Warren in compliance with the Code of Ordinances of the City of Warren. (Chapter 31, Sec. 31-1 through Sec.31-22)

NAME OF APPLICANT: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_  
STREET CITY ZIP

COMPANY NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

LOCATION: \_\_\_\_\_

STATUS OF COMPANY OWNERSHIP \_\_\_\_\_ SOLE OWNERSHIP \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ CORP

E-MAIL ADDRESS \_\_\_\_\_

OWNER'S NAME AND ADDRESS: \_\_\_\_\_  
STREET CITY ZIP

CO-OWNER(S) NAME AND ADDRESS: \_\_\_\_\_

OWNERS DL # & DATE OF BIRTH: \_\_\_\_\_

Requirements: Comprehensive general liability insurance in the following amounts: \$250,000.00 each person, \$500,000.00 each accident and \$100,000.00 property damage. Said policy shall include "HOLD HARMLESS" clause and "10-DAY CANCELLATION" clause. A copy of said policy shall be delivered to the City PRIOR to issuance of the registration.

Fee: \$75.00

Date of Expiration: December 31, 20\_\_\_\_ - 10% Penalty after this date

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me appeared \_\_\_\_\_ who states that all statements on this application are true and that he understands that any false information, revocation of the Michigan Corporation and Securities Commission Registration, or continued violations of the provisions of this ordinance shall be grounds for revocation of this registration by the Director of Public Service.

\_\_\_\_\_  
Notary Public, Macomb County, Michigan

\_\_\_\_\_  
Expiration Date of Commission

Issued by \_\_\_\_\_

Signature: \_\_\_\_\_

Address: \_\_\_\_\_  
Street

www.cityofwarren.org  
Signregistrationform

\_\_\_\_\_  
City Zip Code