



City of St. Clair Shores

Petition to Appear- Sign Arbitration Committee

Community Development & Inspection
27600 Jefferson Avenue
St. Clair Shores, MI 48081

Phone: (586) 447-3340
Fax: (586) 445-4098

Fee: \$25

Permit Ref.# _____

Business Name: _____
(location of sign)

Business Address: _____
(location of sign)

Sign Type: _____ Permanent Temporary

Name of Petitioner: _____

Petitioner Address: _____

Petitioner Phone: _____ E-mail: _____

Please State Reason(s) For Denial _____

Please list any and all items you feel the sign arbitration committee should consider when reviewing your request _____

Hardship Reason for Appeal Request _____

(It is recommended that the petitioner furnish drawings, photographs, etc. to support the request being submitted.)

The petitioner, as affirmed by the signature below, understands and agrees with the following:

1. A non-refundable fee of \$25 is charged for appeals to the Sign Arbitration Committee.
2. Petitioner may appeal an unfavorable decision by the Sign Arbitration Committee to the City Council. An additional fee of \$25 is required for this appeal.
3. Petitioner has reviewed all ordinances pertaining to signs, and fully understands reason(s) for original denial.
4. Petitioner will be notified within 10 business days from date of application as to when and where an appeals meeting will be held. Failure to appear will result in automatic denial and forfeit of fee.

Petitioner's Signature _____ **Date** _____