



APPLICATION FOR THE ARCHITECTURAL REVIEW BOARD (SIGNAGE)



Applicant is: [] Property Owner [] Contractor / Builder [] Business Owner [] Other

Applicant: _____

Address / Phone #: _____

Property Owner: _____

Address / Phone #: _____

Contact Email Address: _____

To the Members of the Architectural Review Board:

I hereby request review by the Architectural Review Board of the plans and elevations as submitted for the Prairie Trail Mixed Use Neighborhood Planned Unit Development.

Location (address) of the: _____

Legal description (Plat & Lot #): _____

Sign Type(s):

- [] Building Sign [] Projecting / Blade Sign [] Monument Sign

Building Sign Tenant Wall Frontage: _____ (FT) Monument Size including base: _____ (SF)

Sign 1 Location on building _____ Sign Area (SF): _____ Illuminated: Yes / No

Sign 2 Location on building _____ Sign Area (SF): _____ Illuminated: Yes / No

Sign 3 Location on building _____ Sign Area (SF): _____ Illuminated: Yes / No

Sign 4 Location on building _____ Sign Area (SF): _____ Illuminated: Yes / No

Precinct:

- [] Residential Mixed Use [] Mixed Use Urban Corridor [] Neighborhood Commercial [] Mixed Use Town Center [] Business Park

Lot Type:

- [] Manor Lot [] Garden Lot [] Common Residential [] Estate Lot [] Attached House Lots [] Neighborhood Commercial [] Village Lot [] Townhouse Lots [] Commercial Out Parcel [] Hamlet Lot [] Front-Loaded Lots [] Business Park

Architectural Style:

- [] Prairie Trail European Romantic [] Town Center Building [] Neighborhood Commercial [] Prairie Trail Colonial Revival [] Town Center Multi-family Building [] Prairie Trail Arts & Crafts [] Commercial Out Parcel [] Prairie Trail Victorian [] Business Park

Attached and made a part of this submittal are the following required items:

- Site Plan
- Sign Details
- Building / Sign Elevation or rendering
- Application Fee

Fee Schedule	
Signage	\$10.00 per sign

EMAIL PDF's to: ARB@AnkenyIowa.gov

OR deliver the completed Architectural Review Board packet to: **City of Ankeny c/o Community Development
1210 NW Prairie Ridge Drive
Ankeny, Iowa 50023**

I certify that I have read and examined this application and that all information in this application is true and correct. I also agree to be legally responsible for the enforcement of this document.

(Signature of Applicant)

Date received _____	Amount Paid _____	<input type="checkbox"/> Cash <input type="checkbox"/> Credit Card <input type="checkbox"/> Check # _____	Office Use Only
Filing # _____	Scheduled Meeting Date _____	Form ARB/APP 07/2023	

**ARCHITECTURAL REVIEW BOARD
DISPOSITION**

Architectural Review Board Meeting Date: _____

- Approved Approved, see the minutes and drawings for condition(s) Denied

Recording Secretary