

MURAL APPLICATION

***All information must be filled out to be processed.

FILE NO.			
		 Fee Paid:	
	ed by:		
1 1000000	/u υy		
Applicant Information	on:		_
PRIMARY	CONTACT IS: Applicar	nt Property Owner	
Applicant:			
Address:		Zip:	
Phone:	Fax:	Email:	
Property Owner:			_
Address:		Zip:	
Phone:	Fax:	Email:	
	1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Property Information	n:		
Site Address:			
Parcel No ·		Zoning:	
T aloci 140		2011111g	
/			
Building Use: (Pleas	se check appropriate box	x.)	
Individual prir			_
Multi-tenant b			
Multi-use buil			
เกเตเน-ดอย อดแ	ding		
Mural Information:			
Wurai illioilliation.			
Marriel Date			
Mural Data			
Mariel Typo			
Mural Type:	`		
(paint, digital, etc.)			
Mural Placement: (wall, other surface)			
	Width		
Surface Area			
(wall, other surface)	Square Feet		
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Mural Dimensions	WidthHeightSquare Feet
Percentage of Area Mural Covers	
If Illuminated, Type of Illumination	
Proposed Hours of Illumination	

All applicants are required to submit the following:

Applicant		Staff		
(√)	Description			
	Completed and signed Mural Permit Application			
	Application Fee			
	Copy of recorded deed or proof of proprietary interest.			
	If the signature on this application is not the owner of the property, an original			
	notarized statement (affidavit of legal interest) from the owner stating the applicant			
	is authorized to submit this application is required.			
	Narrative explaining:			
	Type of mural			
	Design of mural			
	 How nature of mural is relevant to the City of Star 			
	 Type of building or other permanent structure proposed mural will be 			
	painted or applied to.			
	 Proposed timeframe of project 			
	 Proposed maintenance of mural 			
	One (1) 8 ½" X 11" vicinity map showing the location of subject property and street			
	names			
	One (1) 8 ½" X 11" rendering of building or structure indicating proposed location of			
	mural on building or structure.			
	One (1) colored rendering of the proposed mural, including the following:			
	 Complete text to appear on mural (business name, logo, sub-titles, etc.), 			
	including size and lettering style;			
	 Overall mural dimensions; 			
	 Mural and lettering colors; 			

NOTE: If the mural is illuminated, an electrical permit will be required through the City of Star Building Department.

FEE REQUIREMENT:

** I have read and understand the above requirements. I further understand fees are due
at the time of filing. I understand that there may be other fees associated with this
application incurred by the City in obtaining reviews or referrals by architect, engineering,
or other professionals necessary to enable the City to expedite this application. I
understand that I, as the applicant, am responsible for all payments to the City of Star.

	Date	
Applicant / Representative Signature		

AFFIDAVIT OF LEGAL INTEREST

STATE OF)		
COUNTY OF) ss)		
I			
(name)		(addres	es)
(city)		(state)	(zip)
being first duly sworn u	pon oath, depose	and say: That I am the r	ecord owner of the property
described on the attach	ed, and I grant m	y permission to	(name)
(address)		,(state)	(zip)
to submit the accompa	nying application	pertaining to that property	•
Address or location of p	property:		
I understand there may application by architect approve or disapprove will remit payment with	be direct costs in s, engineers, or o the application. I n 30 days.		ary to enable the City to billed on a monthly basis and
site inspections related			ect property for the purpose of
Type of application:			
Dated this	day of		, 20
		(Signature)	
SUBSCRIBED AND SV	VORN to before r	ne the day and year first a	above written.
		Notary Public for Idah Residing at: My Commission Expir	