

TEMPORARY SIGN PERMIT APPLICATION

Name of Business: _____

Address: _____

Name of Owner/Manager: _____

Telephone: _____ Fax: _____

You may have two (2) permits for temporary signs per calendar year, for a TOTAL of sixty (60) days per year. You can divide the number of days for each permit as meets your needs.

THIS PERMIT IS FOR ___ DAYS AND WILL EXPIRE ON _____

DESCRIBE here the temporary sign(s) being requested under this permit:

1. BANNERS: How Many? _____

Size of each: _____

Describe where they will be located: _____

2. PENNANTS: Total length of Strands: _____

Describe where they will be located: _____

3. OTHER: Describe: _____

4. TOTAL COSTS: \$ _____

NOTE: Banners may be hung on the building front or on the ground sign. They cannot be hung on vehicles or in the landscaped area of a shopping center.

Zoning Official Signature: _____ Date: _____