

TEMPORARY SIGN PERMIT APPLICATION

BUSINESS/ORGANIZATION NAME:					
LOCATION OF SIGN MULTIPLE LOCATIONS					
				DATE OF EVENT :	
DESCRIPTION OF	PROPOSED SIGNAGE:				
REASON FOR SI	GNAGE (MARK ONE):				
An event or g selling or progenition of the selling of the selling of the selling or progenition of the selling of the selling or progenition of the selling of the selling or progenition or progenition of the selling or progenition of the selling or progenition or progenition or place that the selling or progenition or place the selling or progenition or place the selling or place the se	pmoting merchandise of ite, wall-mounted ban ite inflatable advertisite ind off site temporary bed on private property attached information is may be in place for a PROMOTION: a price reduction or ite, wall-mounted ban in non-residential zon imum of 90 days per commum of (4) events G: event for a newly estatite, wall-mounted ban ite, wall-mounted ban ite inflatable advertision in the	ncentive based offer for a proners up to 32 square feet ning districts alendar year blished business, not including ners up to 32 square feet e signs, inflatable advertising of occupancy	chlights chlights feet per sign face t of way of way) ust be removed w duct or service, for	e. Off site signs must be within 5 days following, the eventor a specified time period.	
□ OTHER		Please Describ)e		
	BUSINESS OR ORGANIZATIO	N		PRIMARY PHONE () -	
APPLICANT	CONTACT NAME			ALTERNATE PHONE () -	
	MAILING ADDRESS			FAX () -	
	CITY	STATE	ZIP	E-MAIL ADDRESS	
				ct to the best of my knowledge, for which the permit application	