



Permit Number TSN-_____-_____

Application for Temporary Sign Permit

1) APPLICANT (Name, mailing address, phone & email)_____

2) SIGN LOCATION (include business name, address, & phone #): _____

3) SIGN SIZE:

Square Footage of Sign (32 sq. ft. max): _____

Height of Sign (max of 8 ft. total height from ground): _____

4) TYPE OF SIGN: _____ BANNER or _____ A-FRAME

5) SIGN MESSAGE (i.e. "sale", "special event", etc.) _____

6) DISPLAY DATES (Please check one & write in exact dates below)

Up to seven consecutive days once in each calendar month

Start date: _____ End Date: _____

Up to fourteen consecutive days once every 2 months

Start date: _____ End Date: _____ Indicate 2 Months Used: _____

Up to five days in a calendar month provided the signs are displayed on the same day of the week for the entire month

Day of the week you are using: _____

Exact Dates of Sign Use (mo/day): _____

8) Applicant Signature: _____ Date: _____

There is a \$5 fee for each permit

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Do not write below this line

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Expiration Date: _____

Fee: _____

Application Status: Rejected

Approved

Code Officer Signature: _____ Date: _____