

**DEVELOPMENT & STRATEGIC INITIATIVES
PORTABLE SIGN PERMIT APPLICATION**



Date _____

Name of Applicant: _____

Business to which permit applies: _____

Location of Sign, including plans/drawings: _____

Purpose of Advertising:

(Information that will be on the portable sign)

Sign Company: _____ Phone #: _____

Please check requested duration of sign permit: 1 month, 2 months, 3 months

Start date for advertising: _____

Fee submitted: \$ _____

Contact Information: Work #: _____, Cell #: _____

Signature: _____

****APPROVAL MUST BE OBTAINED BY THE DEVELOPMENT & STRATEGIC INITIATIVES PRIOR TO THE ERECTION OF ANY PORTABLE SIGN****

OFFICE USE ONLY

NOTIFIED

APPROVED: 1 month, 2 months, 3 months **DATE:** _____

DENIED: , reason: _____

Comments _____

