

CERTIFICATE OF SIGN ZONING COMPLIANCE

TEMPORARY SIGN

Permit No. _____

SIGN _____

Date Requested _____

Sign Location _____

Event Date _____

Applicant Information

Owner _____

Address _____

City _____ State _____ Zip _____

Removal Contact _____

Phone: _____

ZONING DISTRICT

Description of Sign: Is the Property Owner Approval Attached? Yes No

What is the event:

This application with a copy of Property Owner Approval, must be submitted to the Zoning Enforcement Officer and removal of the sign must take place within 24 hours of the completion of the event.

Applicant's Signature

Date

This application is approved as complying with all applicable zoning restrictions and conditions.

Zoning Enforcement Officer

Date

