

CERTIFICATE OF SIGN ZONING COMPLIANCE

| | | |
|-----------------------|----------------|-------|
| TEMPORARY SIGN | Permit No. | _____ |
| | SIGN | _____ |
| | Date Requested | _____ |
| | Sign Location | _____ |
| | Event Date | _____ |

Applicant Information

| | | | |
|---------|-------|-----------------|-------|
| Owner | _____ | Removal Contact | _____ |
| Address | _____ | Phone: | _____ |
| City | _____ | State | _____ |
| | | Zip | _____ |

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 with in 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 |