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Sign	<b>Ap</b>	plio	cat	ion
Property Ad	ldress:			

Permit #	
For Official use Only	

8-8-1-PP-1-0001011	1 of Official use Only
Property Address:	Sign Installer Business Registration # (Required)
Sign Installer/Contractor Business Name:	Sign Installer/Contractor Phone Number:
Business Name:	Business Owners Phone Number:
Business Owner Name:	Property Owner Name (if different than applicant)
the sign will be.	owner, obtain the signature of the property owner where  the referenced property and give permission to erect a sign.
Print Name (Property Owner) Signature	 Date
Sign Type: (check the correct sign type) Wall: Flat: Projecting: Freestanding: Pole Ground Illumination: No Yes Electrical Permit #	
Sign Details Sign Material: Texture:	Business Details: Measure the front wall of your Business (or your Frontage)  Height:  Total SQ ft of Wall
Height:  X Length:  of Sign:	Total SQ ft of Wall:  Total Signage Allowance:
Total SQ ft of Sign: X \$2.	00=[\$

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