

**Interim Sign Permit**

<b>Owner(s) of Record (please print)</b>		<b>Sign Contractor Information (Please Print)</b>	
Name:		Name:	
Address:		Address:	
E-mail:		E-Mail	
Phone:	Fax:	Phone:	
Parcel Number:			
<b>PROJECT INFORMATION (Please Print)</b>			
<b>Business Name and Address</b>			
<b>Sign Size</b>	In accordance with Section 30-321 (b) for building mounted, and Section 30-321 (c) freestanding,		
<b>Time Limit</b>	The permit shall expire 120 days from the issuance or when the permanent sign is installed and permitted.		
<b>Type of sign (check)</b>	Wall mounted ( <input type="checkbox"/> ) Ground mounted ( <input type="checkbox"/> )		

**Please attach copy of proposed sign (s) with dimensional.**

**Owner's Signature:** \_\_\_\_\_

**Staff approve:** \_\_\_\_\_