



Application for a Sign Permit

For use by Principal Authority			
Date Received::	Building Permit #:	Sign Permit #:	
	Roll number:		
ADDRESS OF SIGN LOCATION:			
DESCRIPTION OF PROPOSED WORK:			
<input type="checkbox"/> Erect New Sign <input type="checkbox"/> Repair Existing Sign <input type="checkbox"/> Alter Existing Sign <input type="checkbox"/> Replace Existing Sign <input type="checkbox"/> Other: _____ <input type="checkbox"/> Extension			
TYPE OF SIGN:			
<input type="checkbox"/> Awning/Canopy Sign <input type="checkbox"/> Portable Sign <input type="checkbox"/> Other: _____ <input type="checkbox"/> Billboard Sign <input type="checkbox"/> Projecting Sign _____ <input type="checkbox"/> Facia Sign <input type="checkbox"/> Pylon Sign			
PROPERTY OWNER'S INFORMATION:			
Last name	First name	Corporation or partnership	
Address			
Municipality	Postal code	Province	E-mail
Telephone number ()	Fax ()	Cell number ()	
APPLICANT'S INFORMATION: APPLICANT IS: <input type="checkbox"/> OWNER <input type="checkbox"/> TENANT <input type="checkbox"/> SIGN COMPANY			
Last name	First name	Corporation or partnership	
Street address			
Municipality	Postal code	Province	E-mail
Telephone number ()	Fax ()	Cell number ()	
ARE YOU:			
Not-For-Profit Organization <input type="checkbox"/> Charitable Organization <input type="checkbox"/> Service Club <input type="checkbox"/> None of the Above <input type="checkbox"/>			

PROPERTY ZONING: (Contact the Planning Office at 519-633-2560) Zone:

SIZE OF SIGN(S):

Length: Width: Height: Area:

One Sided: Yes No Two Sided: Yes No

Duration of Sign:

From: _____ To: _____
Date Date

Digital and Projected Advertising Displays:

Does the sign contain Digital and Projected Advertising Displays: Yes No
If yes, What Type: On Building Off Building
Please indicate if the Digital Sign is capable of automatically adjusting brightness based on ambient light levels:
 Yes No

PROPERTY OWNER'S AUTHORIZATION:
THIS MUST BE COMPLETED BY THE OWNER IF THE OWNER IS NOT FILING THE APPLICATION
Note: If there are multiple Owners, an authorization letter from each Owner (dated with original signature) is required OR each Owner must sign the following authorization:

I, (we) _____, being the registered Owner(s) of the subject lands, hereby authorize _____ to prepare and submit an Application for a Sign Permit.

Signature Date

Declaration of Applicant:

I, _____ declare that:
(print name)
1. The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

Signature of Application Date

PLEASE SUBMIT THE FOLLOWING WITH THE YOUR APPLICATION:

- Two sets of drawings showing all dimensions of the proposed sign(s). In the case of a Fascia Sign, show where the proposed sign will be located on the building.
- Site plan of the subject property indicating the proposed location(s) of the sign(s) in relation to lot lines, buildings, etc.
- Sketch showing the advertising copy of wording to be displayed including style, font size, logos, etc.