

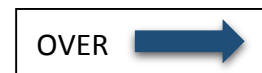
TEMPORARY SIGN PERMIT APPLICATION

Temporary Sign Location Information		
Exact Address/Location (include Suite #): Sign cannot be in the right-of-way		
Business Name:		
Location : _____ Public Institution _____ Place of Worship _____ Multiple Family Dwelling _____ General Commercial _____ General Industrial		

Property Owner Information	
Name:	Address:
Phone:	Email:
Signature of Owner Approval: Required if different than applicant _____	
<i>By signing, I, as the property owner, understand there is a limited amount of time on specific temporary sign permits and this permit may be included in the maximum amount of calendar days per year for temporary signage.</i>	

Applicant Information	
Advertiser:	Advertiser's Address:
Contact Name:	
Phone:	Email:
Signature of Applicant:	

Temporary Sign Permit Information	
What type of an event:	
_____ Grand Opening, Special Event, Holiday	_____ Sales Promotions
_____ Commercial Off-Premise	_____ Non-Profit/Civic Organization Off-Premise
_____ Seasonal Use	



What kind of sign is this: <input type="checkbox"/> Ground Banner <input type="checkbox"/> Wall/Tent Banner <input type="checkbox"/> Pennant <input type="checkbox"/> Portable Sign <input type="checkbox"/> Flag <input type="checkbox"/> Electronic Message Sign
Size of sign (sq. ft.):
Dates sign(s) will be displayed:
Is any portion of this sign illuminated? If so, explain:

Site plans, elevations, and drawings of the proposed temporary signs must be submitted with the permit application. All applications must be completely filled out with the owner’s signature and plans/drawings submitted with the application in order for it to be accepted.

ACKNOWLEDGEMENT AND SIGNATURE

The undersigned hereby represents upon all the penalties of law, that all statements herein are true and that all signs will be constructed in accordance with the Cambridge Zoning Ordinance and other applicable regulations. In addition, the undersigned hereby agrees that a building inspector will be contacted, if required, to inspect the anchoring system.

Applicant Signature	Date	Please Print Name
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