

## Advertising/Signage Application

Town of Port Blandford P.O. Box 70 170 Main Road Port Blandford, NL AOC 2G0 www.portblandford.com

## 1. APPLICANT(S)

I. AFFLICANI (8):				
NAME OF APPLICANT(S)				
MAILING ADDRESS (P.O. BOX)		STREET ADDRESS		CITY/TOWN
POSTAL CODE		TELEPHONE		FAX
TOSHIE CODE		TEEL HONE		
2. BUSINESS:				
STREET ADDRESS:				
ADDRESS	(P.O. BOX)			
POSTAL C	205	TELEPHONE		I FAX
POSTAL C	JUE	TELEPHONE		FAX
3. DESCRIBE BUSINESS:				
TYPE OF SI	_		1	
(A)	OFF-SITE PROMOTIONAL	TEMPORARY	-	
(B)	ON-SITE PROMOTIONAL	TEMPORARY	PERMANENT	
(C)	IS THIS A MOBILE SIGN? [] Yes [] No			
(D)	PROPOSED LOCATION OF SIGN(S)			
	SIGN (A):			
	SIGN (B):			
(E)	TATE IF SIGN IS TO BE [ ] Single-sided [ ] Double-sided [ ] Illuminated [ ] Flashing or changing lights or panels			
(F)	HAVE YOU ATTACHED A PLAN AND SKETCH: [] Yes [] No			
4. SUPPORTING DOCUMENTS:				
Include a neat sketch of sign showing size, wording, colors and design.				
Include a neat and legible plot plan showing location of proposed sign				
NOTE: If you are not the owner of the property for which the sign will be placed, you must obtain a letter of permission from the property owner.				
I, We,, the applicant(s) named herein, do solemnly declare the statements herein contained in this application are true and made with a full knowledge of the circumstances connected with the same. I/we make this solemn declaration, conscientiously believing it to be true and with the full knowledge of the property owner, and knowing that it is of the same force and effect as if made under oath. Signature: Date: Date:				
Dated a	t this		day of	20
	(City/Town)		(Month)	(Year)
	Witness		(Applicant's Signal	ture) TO BE SIGNED BY THE APPLICANT ONLY