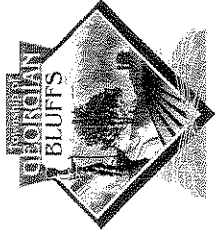


Date Received: \_\_\_\_\_ Permit Number: \_\_\_\_\_



# Township of Georgian Bluffs

177964 Grey Road 18, RR3 Owen Sound, Ontario N4K 5N5 Telephone: 1-519-376-2729

## APPLICATION FOR A SIGN PERMIT

Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Property Owner (if different): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

### Site Information:

Lot: \_\_\_\_\_ Concession/Plan: \_\_\_\_\_ Roll: \_\_\_\_\_

Lot Area \_\_\_\_\_ Lot Frontage \_\_\_\_\_

Existing Land Use: \_\_\_\_\_ Zoning \_\_\_\_\_

### Proposed Sign Specifications ( Attach Drawing(s) of Sign Details and Site Plan as per the requirements of Sign By-law)

Type of Sign : \_\_\_\_\_ Permanent / Temporary

If temporary, indicate date to be installed: \_\_\_\_\_

### Sign Details:

Double Face Sign: Yes / No Sign face dimensions: \_\_\_\_\_

Face Area: \_\_\_\_\_ Total Sign Area: \_\_\_\_\_

Minimum Clear Height of Sign: \_\_\_\_\_ Maximum Height of Sign: \_\_\_\_\_

Distance from: Front Property Line \_\_\_\_\_ Side Property Line \_\_\_\_\_

Illuminated: Yes / No

### Office Use

Fee received \_\_\_\_\_

Site Plan received \_\_\_\_\_

Sign Plans received \_\_\_\_\_

Other permits required :

MTO Permit required? Yes / No Received \_\_\_\_\_

GSCA Permit required? Yes / No Received \_\_\_\_\_

NEC Permit required? Yes / No Received \_\_\_\_\_

Date of expiration for Temporary Sign \_\_\_\_\_

Other information required \_\_\_\_\_

I hereby certify that the information given herein is true and complete to the best of my knowledge and further that I have read and agree to abide by the terms of the Sign By-law and will comply with any other Township By-laws and Regulations and the Building Code.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**Authorization of Owner**

In the Matter of a Sign to be placed at \_\_\_\_\_

I, \_\_\_\_\_ (please print) am the registered owner of the lands that are the subject of this application and I authorize \_\_\_\_\_ to make this application on my behalf.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date