



Sign Permit Application - Temporary Sign

Corporation of the Municipality of Meaford

21 Trowbridge Street West

Meaford, ON N4L 1A1

Phone: 519-538-1060 Fax: 519-538-1556 Email: planning@meaford.ca

Applicant Information:

1. Applicant(s): _____

Full Mailing Address: _____

Phone: _____ Fax/Email: _____

Sign Location:

1. Municipal Address: _____

2. Property owner(s) (if different then applicant): _____

Full Mailing Address: _____

Phone: _____ Fax/Email: _____

Land Owner's Consent:

I, the undersigned, understand and agree to the terms of this application and agree to comply with the provisions of the Municipality of Meaford Sign By-law.

Signature of Owner: _____ Date: _____

Sign Information:

1. Type of Sign:

Banner **Home Development Directional** **Mobile** **Sidewalk** **Special Event**

2. Permit Timeframe:

Commencement Date: _____ Expiration Date: _____

3. Dimensions:

Sign Height (m):	Total Height (m):
Sign Width (m):	Clear Height (m):
Sign Face Area(m²):	Distance from lot line (m):
	Distance from entrances (m):

4. Sign Lighting: External Internal No Lighting

5. Sign Company/Installation Company: _____

Phone: _____ Fax/Email: _____

6. **Attach Site Plan** – This application SHALL be accompanied by a scaled drawing which will include information in regard to the materials used, letters, numerals, insignia, logos, colours, dimensions (height, width, clear height, sign height), setbacks, and all relevant structural information. The CBO may request an engineered drawing.

Applicant's Consent:

I, the undersigned, agree to comply with the provisions of the Municipality of Meaford Sign By-law, as amended. I further agree that neither the granting of a permit, nor the approval of the drawings and specifications, nor the inspections made by the authority having jurisdiction during the work on the building shall in any way relieve me from full responsibility for carrying out the work in accordance with the requirements of any applicable by-law and understand and agree to the terms of this application.

Signature of Applicant: _____ Date: _____

For Office Use Only		
Date Accepted: _____	Accepted By: _____	File #: _____
Roll #: _____	Zoning of Property: _____	
Building Permit: <input type="checkbox"/> YES <input type="checkbox"/> N/A	Variance: <input type="checkbox"/> YES <input type="checkbox"/> N/A	Heritage Permit: <input type="checkbox"/> YES <input type="checkbox"/> N/A
Other Notes:		
Permit Number:	Fee Paid:	Receipt Number:
Application is: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Signature:	Date: