MOBILE SIGN & "A" FRAME SIGN PERMIT APPLICATION

As required by City of Vaughan Sign By-Law 203-92 as amended

BUILDING STANDARDS DEPARTMENT
2141 Major Mackenzie Drive
Vaughan, ON. L6A 1T1
(905) 832-8510

Application: _____ **Permit Application Number:** _____ _____ **Issued:** _____

PROPERTY LOCATION	STREET NO.	STREET NAME		UNIT NO.
	LOT/BLK	PLAN/CON	OTHER	

MOBILE SIGN OR "A"FRAME SIGN DETAILS	**MOBILE SIGN** (Permit Valid for for 21 Days)	O	**From:** _____ **(Start Date)**
	A-FRAME SIGN (Permit Vaild for 6 monthhs)	O	**To:** _____ **(End Date)**
			Sign Location _____ **(Street Name)**

BUSINESS OWNER (Tenant)	NAME			
	STREET NO.	STREET NAME	UNIT NO.	PHONE NO.
	CITY	PROVINCE	POSTAL CODE	FAX

MOBILE SIGN CONTRACTOR / SUPPLIER	NAME		EMAIL ADDRESS	
	STREET NO.	STREET NAME	UNIT NO.	PHONE NO.
	CITY	PROVINCE	POSTAL CODE	FAX NO.

BUSINESS OWNER DECLARATION

I,	LAST NAME	FIRST NAME		PHONE NO.
of	STREET NO.	STREET NAME	UNIT NO.	FAX NO.
	CITY	PROVINCE	POSTAL CODE	MOBILE/PAGER NO.

Do hereby declare the following:

1. THAT I am
   - O the business owner as stated above
   - O an officer/employee of the business owner and authorized by the business owner to make this application.
   - O an officer/employee of _____ which is an authorized agent of the business owner
2. THAT the statements made and the information provided herein are true and correct and are made and provided with full knowledge of the circumstances relating to this application

_____ Signature

_____ Date

SIGN COMPANY DECLARATION

I,	COMPANY NAME			PHONE NO.
of	STREET NO.	STREET NAME	UNIT NO.	FAX NO.
	CITY	PROVINCE	POSTAL CODE	MOBILE/PAGER NO.

Do hereby declare the following:

1. THAT I am the business owners authorized agent
2. THAT the statements made and the information provided herein are true and correct and are made and provided with full knowledge of the circumstances relating to this application

_____ Name

_____ Signature

_____ Date

OFFICE USE ONLY

PERMIT TYPE	AREA CODE	BUILDING TYPE	WORK PROPOSED	CALCULATED CONST. VALUE
SM / SA		**501 / 502**	**NEW**	**$500**

PERMIT PAYMENTS

DATE:_____ **PAYMENT TYPE: 1010** **RECEIPT No.** _____ **FEE PAID $**_____

DATE:_____ **PAYMENT TYPE: 1010** **RECEIPT No.** _____ **FEE PAID $**_____

Personal information on this form is collected under the legal authority of the Municipal Act. This information will be used to process the Permit Application and in the administration and enforcement of the previously noted statute. As a public record, information contained on this application and the documents required to issue a sign permit may be disclosed to any individual under the Municipal Freedom of Information and Protection of Privacy Act. Questions about this collection should be directed to the Manager of Customer and Administrative Services, 2141 Major Mackenzie Drive, Vaughan, Ontario L6A 1T1. (905) 832-8510.