



**For use by Principal Authority (CITY OF BROCKVILLE)**

Application No.:	Permit No.:	Roll No.:	Date Received:
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Application submitted to: **THE CORPORATION OF THE CITY OF BROCKVILLE**

**A. Project information**

Building number, street name		Unit number	Lot/con.
Municipality	Postal code	Plan number/other description	

**B. Applicant**      Applicant is:     Owner or     Authorized agent of owner

Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number (    )	Fax (    )	Cell number (    )	

**C. Property Owner (if different from applicant)**

Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number (    )	Fax (    )	Cell number (    )	

**D. Sign Type**

- Portable Temporary Sign (complete Sections E and G)       A-Board/Panel Sign (complete Sections F and G)

**E. Portable Sign**

Sign Dimensions	Current use of building	Proposed Install Date
Description of proposed sign		<input type="checkbox"/> 30 days <input type="checkbox"/> 60 days <input type="checkbox"/> 90 days

**F. A-Board and Panel Sign**

Sign Dimensions	Current use of building	Proposed Install Date
Description of proposed sign		

**G. Required Information**

Attach the following Information:

- Photo or rendering of sign including dimensions and other relevant details
- Site plan with location of sign, setbacks and current adjacent land uses as per Sign By-law 84-89, as amended

**H. Authorization of Owner for Agent to Make Application**

If the applicant is not the owner of the land that is subject to this application, the written authorization of the owner stating that the agent is authorized to make the application must be included or the authorization set out below must be completed.

I \_\_\_\_\_, am the owner of the land  
(print name)

that is subject to this application for a sign permit and I authorize \_\_\_\_\_ to make this application on my behalf.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner

**I. Declaration of Applicant**

I \_\_\_\_\_ certify that:  
(print name)

The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge. I have authority to bind the corporation or partnership (if applicable).

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

**REVIEW COMMENTS (for office use only):**

\_\_\_\_\_

\_\_\_\_\_

**SIGN BY-LAW 84-89, as amended:**

**DATE:**

**SIGN ADMINISTRATOR:**

**Total Fees: \$80.00** (non-refundable)

**Sign Placement Requirements as Described in Section 5.17 of the Sign By-law, as amended:**

