

## Town of Six Mile Sign Permit Application

One sign per application – Incomplete applications cannot be processed.

Temporary	_Permanent	Special Event	Sales Event
(60 days maximum per yea			
Address of proposed sign:			
Tenant Name:			
Name of Applicant:		_ Company/Organization	
Telephone #:		_ Email Address:	
Name of Contractor:		_ Address:	
Telephone #:		_ Email Address:	
Type of Sign: New Sign	Repair	Repaint Single Face	Double Face
Flat against building? YE	S NO		
Freestanding Sign? YES_	NO	Electrically wired? YES	NO
Within public right-of-way? YES NO			
Building Frontage:	feet	Height of building:	feet
Dimensions:Total square feet (Sign text and logo dimensions only)			
Projecting Sign? YES	NO	Projecting from building	inches/feet
Projecting above roofline _	inches/ft.	Automatic Changeable Copy?	Yes NO
I hereby certify that I have the authority to make the foregoing application, that the information is correct, and that the construction will conform to the regulations of the Town of Six Mile.			
Signature:		Date:	