

Location of Proposed Sign

Street Address: _____

Property Owner

Name: _____

Address: _____

City, Prov.: _____ Postal Code: _____

Phone: _____ Email: _____

Is the property owner the applicant? Yes ____ No ____

Business / Tenant

Name: _____

Address: _____

City, Prov.: _____ Postal Code: _____

Phone: _____ Email: _____

Is the Business / Tenant the applicant? Yes ____ No ____

Applicant (if not either of the above), **select one:** Sign Company Agent of the owner Other, please specify _____

Name: _____

Address: _____

City, Prov.: _____ Postal Code: _____

Phone: _____ Email: _____

Proposed Temporary Sign, select one: Commercial Mobile Sign

Sign Area: (measured in metres)

Height: _____ Width: _____ Overall Height: _____ (measured from grade to top of sign structure)

 Sandwich Board Sign

Sign Area: (measured in metres) Height: _____ Width: _____

 Special Event Banner

Banner Message: _____

 Sign Associated with a Temporary Sales Trailer (note: once approved, a Building Permit will be required to erect these signs)

Display Period of Proposed Sign

Date Installed _____ Date Removed _____ Total # of Days _____

Additional Documentation submitted

- Site Plan: (It is the responsibility of the applicant to provide an accurate site plan which clearly denotes lot lines, setbacks of sign and sign location.)
- Owners Authorization form: (required when owner of the property is not the applicant, or for banners when connected to a private property which is not owned by the applicant)
- Sign Image / message
- Details of connection for all banners

Declaration:

The undersigned hereby applies for a sign permit in accordance with the application, plans, and specifications herewith submitted and acknowledges that the proposed work must comply with the provisions of Sign By-law No. 72-96, as amended, and all other by-laws of the Corporation of The City of Oshawa and the Regional Municipality of Durham, it being expressly understood that neither the issuance of a permit nor the carrying out of inspections by the City shall relieve the applicant from full responsibility for compliance with all regulations and by-laws. The applicant understands that any movement of a sign from its approved location, without City approval, following permit issuance shall result in the revocation of the sign permit without refund, and/or removal of the sign by the City.

Name: _____ Signature: _____ Date: _____

For Office Use Only	Application Number	
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Special Condition:

	<i>Initial</i>	<i>Date</i>		<i>Initial</i>	<i>Date</i>
Zoning/Official Plan			Permit Fee \$		
Structural Plans Examination			Application Accepted By		
Encroachment Agreement			Council Approval		
Planning/S.P.A			Other (<i>Specify</i>)		
M.T.O.			Commissioner		
Owner's Authorization			Permit Issued by		

This form may contain personal information as defined under the Municipal Freedom of Information and Protection of Privacy Act. This information is collected under the legal authority of the Municipal Act, 2001, S.O. 2001 c.25, as amended. This information will be used and maintained by the City of Oshawa to process the Temporary Sign Permit Application. Questions regarding this collection may be directed to the City's Information Access and Privacy Officer at 905-436-3311