

For Official Use:

Town of Sturbridge BUILDING DEPARTMENT

PERMANENT SANDWICH BOARD SIGN APPLICATION

Date of Receipt: File Number: Completed:	Date of Approval:
PART A: OWNER/A	PPLICANT/AGENT INFORMATION
1. Name of Property Owner:	·
Address:	
Telephone No	Fax No
Email Address:	<u> </u>
2. Name of Applicant: Business Name: Address:	
	Fax No
Email Address:	•
3. Name of Agent:	•
Telephone No	Fax No
Email Address: :	.•

Part B Details of Application - Please r			<u>he</u> .
Zoning Bylaw for complete requ	<u>uirements (attached</u>	Ĵ	•
			•
Provide scaled drawing with sign dimensions no	ot to exceed 30" X 48"		
Provide plan showing location of proposed sign	. Please note, sign ma	у	
not project into the public way, be installed on p	oublic sidewalks or		
block visibility at intersections.			
Provide copy of Design Review Committee decis	sion.		
AUTHORIZATION (Must be signed by application)	unt)		
I understand that I must comply with all respecting sign in accordance with the specifications submitted plans approved by the Design Review Committed be removed at the close of business each day.	itted and in accordan	ce with	ı the
Signature of Applicant	Date		
AUTHORIZATION (Must be signed by owner)		
I am the record owner of the property for which such, I am familiar with the work proposed to b			
I hereby give permission for this application to that certain restrictions may be placed on the p the proposed work.			
I further certify that under the penalties of perjapplication.	ury, I am authorized t	o sign t	his
Signature of Owner	Date	-	