



**CITY OF DRYDEN**

30 Van Horne Avenue  
Dryden, ON P8N 2A7

Tel. (807) 223-6117  
Fax. (807) 223-6141

**SIGN PERMIT APPLICATION**

Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

1. Type of sign: Encroaching  Ground  Mobile  Projecting  Roof  Wall

If a mobile sign, provide date sign to be installed \_\_\_\_\_ and date sign to be removed \_\_\_\_\_ .

**NOTE:** The maximum period a mobile sign may be displayed on any property is four months per calendar year.

2. Location of proposed sign \_\_\_\_\_  
street name and number

3. Distance of sign from nearest street or property line: \_\_\_\_\_

4. Will the sign be located near the intersection of two street lines: Yes  No

If "Yes", provide distance of sign to the intersecting street lines: \_\_\_\_\_ metres

5. Will the sign be located on, or project over municipal property? Yes  No

6. Will the sign be located on property owned by the applicant? Yes  No

If "No", the following declaration must be completed and this application must be signed by the agent authorized to act on behalf of the property owner.

I (print name) \_\_\_\_\_ declare I am authorized by the property owner of those lands identified in Item 2 above, to undertake installation of the subject signage.

\_\_\_\_\_  
Signature of property owner or authorized agent Date

7. Attach drawing of proposed signage showing all dimensions and message to be displayed.

If encroaching, ground or mobile sign is to be installed provide site plan of proposed location.

If drawing not attached, provide sketch of proposed sign, showing all dimensions and message to be displayed:

If encroaching, ground or mobile sign is to be installed and site plan is not attached, provide sketch of proposed location showing all distances between sign and property lines:

Where installation is on or encroaching upon municipal lands, approval from the City of Dryden Public Works Department must be received prior to commencement of work.

**Office Use Only:**

Authorization: \_\_\_\_\_ Title: \_\_\_\_\_

Comments: \_\_\_\_\_

Permit Approval Date: \_\_\_\_\_ Permit Number: \_\_\_\_\_