



City of Hamilton

TEMPORARY SPECIAL EVENT SIGN PERMIT APPLICATION

Total Fee \$.00

OFFICE USE ONLY		
PERMIT # <u>EVENT</u> - _____	Site Plans attached: _____	Date Expires: _____
Zoning District: _____	Application Taken By: _____	Date: _____
Permit Approved By: _____	_____	_____
	Building Official	Date

Location of sign placement: _____ (Attach Site Map)

Reason(s) for Special Event Sign Permit Request: (please be specific)

Event Dates: Start: _____ End: _____

On Site Contact: Name: _____ Cell Phone: _____

Property Owner: _____ Company: _____

Home or Work Phone: _____ Cell Phone: _____

E-Mail: _____

Mailing Address: _____

Applicant: _____ Company: _____

Work Phone: _____ Cell Phone: _____ Fax: _____

E-Mail: _____

Mailing Address: _____

A SITE PLAN IS A REQUIRED.

APPLICANT ACKNOWLEDGES THAT THIS APPLICATION IS FOR A TEMPORARY AND REVOCABLE PERMIT. APPLICANT AGREES TO REMOVE ANY ENCROACHMENT FROM THE AREA UPON NOTICE BY THE CITY OF HAMILTON AND TO RESTORE THE LOCATION AT NO EXPENSE TO THE CITY OF HAMILTON.

In conjunction with the Hamilton Municipal Code, Zoning Ordinance Title 17, Signs, Chapter 17.104, Sections 020, 040, 070, 150 and 155, and Title 12, Streets, Sidewalks and Public Places, Chapter 12.12, Sections 090 and 100. I have read and understand the rules and regulations for this Temporary Special Event Sign Permit application. It is understood and agreed that the property owner will defend and indemnify the City of Hamilton against any claim which arise out of or is based on the existence of the encroachment within the right-of-way. It is also understood and agreed that the City of Hamilton is not responsible for any damage to the encroachment which is a result of its location within the right-of-way.

The above described encroachment shall not be subject to addition, modification or renovations without prior approval from the City of Hamilton. Violation of any of these terms shall make this permit null and void.

Application Date: _____ **Property Owner's Signature:** _____

Application Date: _____ **Applicant's Signature:** _____