

TOWN of ALFRED

P.O. Box 850, 04002

APPLICATION FOR A SIGN PERMIT

Property Owner _____

Date Received _____

Property Address _____

Date Approved _____

Map & Lot numbers _____

Fee \$ _____

Applicant if different _____

Description of sign:

Wording: _____

Size: _____

Is the sign mounted on a building or by other means? _____

Is the sign illuminated? _____ (no flashing signs allowed)

Is the sign for a commercial use or home occupation? _____

By signing below, you agree to adhere by Alfred's Sign Ordinance, Article XVII, Section 160-104, page 160:96

Applicant

Date _____

Approved, Code Enforcement Office