

Jack Mee, Building Commissioner 155 Village Street - Medway, MA 02053 508-533-3253

APPLICATION FOR ROUTE 109 RECONSTRUCTION TEMPORARY SIGN PERMIT – 2017 CONSTRUCTION SEASON

To the Building Commissioner:	Date:
The undersigned hereby applies for a temporary sign perrand plans filed herewith:	nit according to the following information
Business Name:	
Business Owner:	
Business Address:	
Phone Number: Email	il:
Zoning District:	
Type of Sign (Select one): Banner	Yard Pavement
Describe where the temporary sign will be located:	
Describe the temporary sign – size, materials, colors, etc. planned temporary sign.	Attach a scaled, colored drawing of the
Proposed Start Date for Sign Installation:	
I have read and understand the requirements for a temporand agree to the stated terms. I am submitting this applica understand the permit will expire when the 2017 constructions are the stated terms.	tion to the Building Department and
Applicant's Signature	Date
Property Owner's Signature if different than Applicant	Date