

APPLICATION FOR SIGNAGE APPROVAL
TOWN OF MONTAGUE

INSTRUCTIONS: CHECK APPROPRIATE BOX ()
NEW SIGN () REPLACE EXISTING SIGN ()

1. GENERAL INFORMATION:

APPLICANT'S NAME: _____
MAILING ADDRESS: _____ POSTAL CODE: _____
RESIDENCE TELEPHONE NO: _____ BUSINESS NO: _____

2. PROPERTY INFORMATION:

PROPERTY OWNER (IF DIFFERENT FROM APPLICANT): _____
PROPERTY TAX NO: _____ EXISTING ZONING: _____
PROPERTY SIZE: ROAD FRONTAGE WIDTH _____ DEPTH: _____
LOT AREA: SQ. FEET _____ ACRES _____ CORNER LOT: _____
IF CORNER LOT, SIDE YARD FRONTAGE: _____
STREET ADDRESS: _____

3. SIGN DETAILS:

DETACHED FROM BUILDING: _____ ON BUILDING: _____
TYPE OF MATERIAL: _____
SIZE: HEIGHT _____ WIDTH _____ SETBACK: _____
VARIANCE REQUIRED: YES () NO ()
USES ELECTRICITY: YES () NO ()

4. ESTIMATED COST OF SIGN (INCLUDING INSTALLATION): _____

(OVER)