



City of Tigard

COMMUNITY DEVELOPMENT DEPARTMENT

Temporary Sign Permit Application

SIGN LOCATION

Address: _____ Suite #: _____

City/state: _____ Zip: _____

Tenant or business: _____

Property owner: _____

Address: _____

City/state: _____ Zip: _____

Phone: _____ Email: _____

Contact name: _____

APPLICANT

Name: _____

Address: _____

City/state: _____ Zip: _____

Phone: _____ Email: _____

Contact name: _____

REQUIRED SUBMITTAL ELEMENTS

- Size information type and size dimensions
- Application Fee
- Property owner signature/ written authorization

NOTES:

- Applications will not be accepted without all required submittal elements.
- Temporary Signs [18.435.100](#)

FOR STAFF USE ONLY

Case No.: _____

Approved and issued:

By: _____ Date: _____

Permit fee: _____

Base Zone: _____

Total sign area: _____

I:\Community Development\Land Use Applications\02_Forms and Templates\Land Use Applications Rev 12/14/2017

SIGN INFORMATION (Check one)

Balloon
Install date: _____ (Valid for 10 days)

Lawn Sign
Install date: _____ (Valid for 30 days)

Banner
Install date: _____ (Valid for 30 days)

Sign dimensions: _____ Sign area: _____ (sq.ft.)

Materials: _____

Direction wall faces (circle one): N S E W NE NW SE SW

Applicant's signature

Print name

Date

Owner's signature

Print name

Date