



CITY OF WACO

INSPECTION SERVICES DEPARTMENT

P.O. BOX 2570

WACO, TX 76702-2570

PHONE# 254-750-5970

FAX# 254-750-5624

MOBILE / TEMPORARY SIGN PERMIT APPLICATION

DATE SUBMITTED _____

ADDRESS OF SIGN LOCATION



PLEASE INDICATE WITH AN "X" THE TYPE OF SIGN YOU ARE APPLYING FOR:

___ MOBILE SIGN ___ CONSTRUCTION SIGN ___ DEVELOPMENT SIGN

___ REAL ESTATE SIGN ___ BANNERS, FLAGS, PENNANTS / BALLOONS

APPLICANT

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE NUMBER _____ FAX NUMBER _____

OWNER OF PROPOSED TEMPORARY SIGN

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE NUMBER _____ FAX NUMBER _____

SEE BACK PAGE

PROPERTY OWNER – SIGNATURE REQUIRED

NAME _____ SIGNATURE _____

ADDRESS _____

PHONE NUMBER _____

ADDITIONAL COMMENTS: _____

Application will not be processed if the application is not complete. The Property Owner must sign the application or the application will be REJECTED.

THE FOLLOWING IS ALSO REQUIRED TO BE INCLUDED WITH THIS APPLICATION IN ORDER FOR THIS APPLICATION TO BE COMPLETE:

1. ONE OVERALL PLAN SHOWING ANY EXISTING SIGNAGE IN RELATION TO THE PROPOSED LOCATION OF THE TEMPORARY SIGN.

Important: After the installation of the sign is complete, a final inspection of each sign will be made based on the information provided on this form. Signs that are not installed to the specifications provided herein are subject to enforcement actions by the Inspection Services Department; up to and including removal of the sign.

MAIL COMPLETED APPLICATION TO:
INSPECTION SERVICES DEPARTMENT
P.O. BOX 2570
WACO, TX 76702-2570
EMAIL: JUANL@CI.WACO.TX.US

- OFFICE USE ONLY -

Inspector Final _____ Date _____

Comments: _____

