

FIXED SIGN VARIANCE APPLICATION*

(*Form authorized under the Municipal Act for relief from By-Law 2004-212-RE respecting the lawful erection of signs and advertising devices)

| | | | |
|---|--|---|---|
| Sign Application # (if any): 2012- | Building Division, 111 Sandiford Drive, L4A 0Z8, 905-640-1910 Ext. 2235 | | |
| TOWN OF WHITCHURCH-STOUFFVILLE | | | |
| Applicant for Variance: | | | |
| Full Name: | | Business Name: | |
| Street Address: | | | |
| Municipality: | | | |
| Phone: | Cell: | Fax: | E-mail: |
| Property Owner (where sign will be erected): | | | |
| Full Name: | | Business Name: | |
| Street Address: | | | |
| Municipality: | | | |
| Phone: | Cell: | Fax: | E-mail: |
| Proposed Sign Information: | | | |
| Name of Business Advertising: | | | |
| Sign Address: | | | |
| Concession#: | Part Lot#: | Registered Plan & Lot#: | |
| Type of Sign: | | | |
| Ground <input type="checkbox"/> | Wall <input type="checkbox"/> | Canopy <input type="checkbox"/> | Roof <input type="checkbox"/> |
| Project <input type="checkbox"/> | Window <input type="checkbox"/> | Soffit <input type="checkbox"/> | Other (Please Specify) |
| Externally Lighted <input type="checkbox"/> | | Internally Lighted <input type="checkbox"/> | |
| Digital or Electronic Display <input type="checkbox"/> | | Not Lighted <input type="checkbox"/> | |
| Is this sign located in the 'Business Improvement Area'? YES <input type="checkbox"/> or NO <input type="checkbox"/> | | | |
| Variance Details: | | | |
| Please give the reason(s) why the proposed sign can not comply with Sign By-Law 2004-212-RE: | | | |
| Please state all the sections, subsections and specific clauses which will not conform to the Sign By-Law: | | | |
| Applicant for Variance Declaration: | | | |
| <p style="text-align: center;">I understand that a non-refundable variance fee must accompany this application. I attest that the information contained herein is true to the best of my knowledge <u>and</u> I have the authority to bind the corporation or partnership (if applicable)</p> <p style="text-align: center;">(CHECK ALL THAT APPLY)</p> | | | |
| I am the: | <input type="checkbox"/> | Sign Permit Applicant | <input type="checkbox"/> |
| | <input type="checkbox"/> | Sign Designer or Erector | <input type="checkbox"/> |
| | | | <input type="checkbox"/> |
| | | | Agent for the Owner |
| | | | <input type="checkbox"/> |
| | | | Property Owner |
| Name (PRINT) | Signature | Date | |