



# Temporary Application for Pennants

**Must be removed within 30 days**

Permit # \_\_\_\_\_

Date submitted \_\_\_\_\_

Contact name:	
Address:	
Phone, Fax & Email:	
Name of Business:	
Business Owner name & address:	
Where on the building will the Pennant be located:	
Phone number:	Parcel Number
Type of Pennant and size:	
Will there be any words on the pennants?	
Building owner or land owner signature:	

**Must include diagram of Pennants and where it is placed on the building.**