

**TOWN OF WELLESLEY - BUILDING DEPARTMENT
TEMPORARY SIGN REGISTRATION APPLICATION**

PURSUANT TO MA STATE BUILDING CODE - 780 CMR
AND TOWN OF WELLESLEY ZONING BYLAWS, SECTION XXIIIA

For Office Use Only

REG # _____

DATE _____

PLEASE COMPLETE ALL SECTIONS IN FULL

Temporary signs permits shall be limited to display such signs for a period not exceeding thirty (30) days with no more than three (3) such thirty (30) day periods permitted per calendar year.

SECTION 1 - PROPERTY / BUSINESS ADDRESS & OWNERSHIP		
1.1 Property Address (Number and Street)		1.2 Unit / Suite
1.4 Business Name		Business Owners Name, Address and Phone #
1.5 Property Owner		
Name (Print)		Address Telephone

Please state the dates the temporary sign(s) will be displayed:

From _____ to _____

From _____ to _____

From _____ to _____

If exercising additional time frames other than the first thirty (30) days, and they are not listed above, the Building Department shall be notified in writing the additional time frame request or the sign(s) shall be removed. The Building Department has the right to impose fines if Zoning requirements are not met.

SIGN 1	Does this sign replace an existing one? Y <input type="checkbox"/> N <input type="checkbox"/>	
1. Type	<input type="checkbox"/> Wall <input type="checkbox"/> Window <input type="checkbox"/> Standing <input type="checkbox"/> Awning	
2. Dimensions	Height (ft/in) _____ Width (ft/in) _____ Area (sq. ft.) _____ Area of Facade _____ Letter Height (in) _____	
3. Location	Height of highest part of sign / awning above ground elevation _____	If yes, requires prior written permission per Board of Selectman
	Will this sign project into, on or over a public sidewalk, street or way? Y <input type="checkbox"/> N <input type="checkbox"/>	
4. Materials:	_____	
5. Total number of existing Sign's and the Square Footage:	Number of Sign's _____	SQ. ft. _____
6. Wording	_____	

APPLICATION DECLARATION

I the undersigned, as permit Applicant(s), hereby declare that the statements and information on the foregoing application are true and accurate, to the best of my (our) knowledge and belief.

Signed under the pains and penalties of perjury.

Business Owner Signature (Applicant)

Date

Building Inspector Signature

Date

** If the property owner has authorized an agent to act on his/her behalf, please include a signed authorization letter with this application.*