

TEMPORARY SIGN PERMIT APPLICATION

CITY OF WATKINSVILLE INSPECTION DEPARTMENT

TO BE FILLED OUT BY APPLICANT

BUSINESS NAME _____	LICENSE # _____
STREET ADDRESS _____	
OWNER _____	
MAILING ADDRESS _____	
PHONE # _____	

TYPE OF SIGN (Banner, portable, sandwich board, etc.) _____

LOCATION (if different than business address), all proposed locations must be listed

Location #1 _____	#2 _____	#3 _____	#4 _____
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Note: It is the responsibility of the applicant to remove all signs at the end of the permit period of 14 days. No sign is to be located on the public right of way, or mounted on any utility poles- Offending placement will be removed without notice. (Size of sign cannot exceed 4 ft in height and 12 sq. ft. per side)

Size of proposed sign: height _____ / Width _____

2 WEEK DISPLAY PERIOD _____ **TO** _____

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Contractor/Owner _____ Date

BASE PERMIT FEE PAID- \$10 PER APPLICATION <> CHECK _____ CASH _____

THIS PERMIT BECOMES NULL & VOID AFTER THE DISPLAY PERIOD DATES REFLECTED ABOVE. ONLY FOUR TEMPORARY SIGN PERMITS MAY BE REQUESTED DURING THE CALENDAR YEAR. TEMPORARY SIGNS MUST BE REMOVED AFTER EXPIRATION OF THE TEMPORARY SIGN PERMIT.

The application and other submitted information having been found to be in compliance with all codes and ordinances of the CITY OF WATKINSVILLE is approved.

Code Enforcement Officer _____ Date

City Clerk _____ Date

AFFIDAVIT OF LICENSE OR PERMIT APPLICATION OR BENEFIT APPLICATION

As an applicant for any City: 1) License, 2) Permit or 3) benefits (including new employment by the City which provides employee benefits, and including labor and construction and other independent contractor contracts with the City which provides benefits to the contractor), in compliance with Georgia Code Section 50-36-1, the Georgia Security and Immigration Compliance Act, and per the Federal "Systematic Alien Verification for Entitlements (SAVE)" Program, I sign this affidavit under oath, certifying I am not an unauthorized alien, and further certifying none of my employees or subcontractors (if any) are unauthorized aliens, and furthermore I initial the appropriate designation for myself below:

_____ I am a United States Citizen;
INITIAL HERE
OR

_____ I am a legal permanent resident 18 years of age or older, or I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, 18 years of age or older (Alien Registration Number as Follows: _____), and I certify that I am lawfully present in the United States.

In making the above sworn certification, under oath, I understand that any person who knowingly and willfully makes a false, fictitious or fraudulent statement or representation in an affidavit shall be guilty of a violation of code section 16-10-20 of the Official Code of Georgia.

Applicant Signature: _____

Print Name: _____

Sworn to and subscribed before me
This ____ day of _____, 20____.

Notary Public
My Commission Expires: _____