

# Temporary Sign Application

Town of Manchester, Department of Planning & Zoning  
 6039 Main Street, Manchester Center, VT 05255  
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| Applicant                                     |           |             |       |
|---|-----------|-------------|-------|
| Name:   |           |             |       |
| Mailing Address:                              |           |             |       |
| City:   | State:    | ZIP Code:   |       |
| Phone:  | E-mail:   |             |       |
| Signature:                                    |           |             | Date: |
| Dates Signs to be Displayed                   |           |             |       |
| Start Date:                                   | End Date: | Event Date: |       |
| Event:  |           | Dimensions: |       |
| Location 1                                    |           |             |       |
| Street Address where Sign is to be displayed: |           |             |       |
| Landowner Name:                               |           |             |       |
| Mailing Address:                              |           |             |       |
| City:   | State:    | ZIP Code:   |       |
| Phone:  | E-mail:   |             |       |
| Landowner Signature:                          |           |             | Date: |
| Location 2                                    |           |             |       |
| Street Address where Sign is to be displayed: |           |             |       |
| Landowner Name:                               |           |             |       |
| Mailing Address:                              |           |             |       |
| City:   | State:    | ZIP Code:   |       |
| Phone:  | Email:    |             |       |
| Landowner Signature:                          |           |             | Date: |
| Location 3                                    |           |             |       |
| Street Address where Sign is to be displayed: |           |             |       |
| Landowner Name:                               |           |             |       |
| Mailing Address:                              |           |             |       |
| City:   | State:    | ZIP Code:   |       |
| Phone:  | Email:    |             |       |
| Landowner Signature:                          |           |             | Date: |

**See Reverse for Fee Schedule & Submission Requirements**

| Additional Location 1                                |               |  |   |
|--|---------------|--|---|
| Street Address where Sign is to be displayed:        |               |  |   |
| Landowner Name:                                      |               |  |   |
| Mailing Address:                                     |               |  |   |
| City:  | State:        | ZIP Code:  |   |
| Phone:   | E-mail:       |  |   |
| Landowner Signature:                                 |               |  | Date:   |
| Additional Location 2                                |               |  |   |
| Street Address where Sign is to be displayed:        |               |  |   |
| Landowner Name:                                      |               |  |   |
| Mailing Address:                                     |               |  |   |
| City:  | State:        | ZIP Code:  |   |
| Phone:   | Email:        |  |   |
| Landowner Signature:                                 |               |  | Date:   |
| Additional Location 3                                |               |  |   |
| Street Address where Sign is to be displayed:        |               |  |   |
| Landowner Name:                                      |               |  |   |
| Mailing Address:                                     |               |  |   |
| City:  | State:        | ZIP Code:  |   |
| Phone:   | Email:        |  |   |
| Landowner Signature:                                 |               |  | Date:   |
| Additional Location 4                                |               |  |   |
| Street Address where Sign is to be displayed:        |               |  |   |
| Landowner Name:                                      |               |  |   |
| Mailing Address:                                     |               |  |   |
| City:  | State:        | ZIP Code:  |   |
| Phone:   | Email:        |  |   |
| Landowner Signature:                                 |               |  | Date:   |
| Fee Calculation                                      |               | <i>Each approved sign will receive a sticker that must be affixed to the lower right-hand corner of the sign as viewed from the front or direction of travel on any adjacent public right-of-way.<br/>No sign may be placed within any public right-of-way.<br/>Temporary signs may not be displayed for more than seven consecutive days.</i> | <b>ABBREVIATION:</b><br>AO – Administrative Officer |
| First Three Temporary Signs                          | \$25          |  |   |
| Each Additional Sign                                 | \$10          |  |   |
| <b>Total:</b>  |               |  |   |
| <i>Charitable groups exempt from payment of fee.</i> |               |  |   |
| For AO Use   |               |  |   |
| Project #:   | Fee Received: | Date Received:   |   |