



TEMPORARY SIGN APPLICATION



Accepted By:	
Date:	
X-Ref/Case Nos.	
DEPARTMENT USE ONLY	

www.cityoflanasterca.org

CITY OF LANCASTER ■ PLANNING DEPARTMENT ■ 44933 FERN AVENUE, LANCASTER, CALIFORNIA 93534 ■ (661) 723-6100

G E N E R A L I N F O	BUSINESS NAME		
	BUSINESS OWNER/APPLICANT NAME	PHONE ()	FAX ()
	BUSINESS OWNER/APPLICANT ADDRESS / CITY / STATE / ZIP		EMAIL
	PROPERTY OWNER NAME *(SIGNATURE REQUIRED BELOW)	PHONE ()	FAX ()
	PROPERTY OWNER ADDRESS / CITY / STATE / ZIP		EMAIL
	LOCATION OF PROPOSED TEMPORARY SIGN		
	PROVIDE THE SPECIFICATION OF THE PROPOSED TEMPORARY SIGN (Height, width and depth)		
R E Q U I R E M E N T S	SUBMITTAL REQUIREMENTS		
	1. Provide a photo of the proposed temporary sign including text and logo.		
	PROPERTY OWNER'S CONSENT		
	The undersigned states that he/she is the owner(s) of the property described herein, and hereby give authorization for the filing of this application.		
	PROPERTY OWNER NAME	SIGNATURE	DATE
	PROPERTY OWNER NAME	SIGNATURE	DATE
	AGREEMENT ABSOLVING THE CITY OF LANCASTER OF ALL LIABILITIES. I DO BY MY SIGNATURE ON THIS AGREEMENT absolve the City of Lancaster of all liabilities that may be applicable to the property described herein.		
	BUSINESS OWNER/APPLICANT NAME	SIGNATURE	DATE
BUSINESS OWNER/APPLICANT NAME	SIGNATURE	DATE	