

**APPLICATION FOR SIGN ERECTOR
CITY OF HAZEL PARK**

NAME OF BUSINESS: _____

ADDRESS OF BUSINESS: _____

BUSINESS PHONE: _____ STATE LICENSE # _____

APPLICANT'S NAME, HOME ADDRESS, HOME TELEPHONE NUMBER, DRIVER'S LICENSE NUMBER AND SOCIAL SECURITY NUMBER:

ALL OWNERS AND OFFICERS OF BUSINESS MUST FILL OUT COMPLETELY:

1. NAME: _____	2. NAME: _____
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POSITION: _____	POSITION: _____
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DRIVERS LIC. # _____	DRIVERS LIC. # _____
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HOME ADDRESS: _____	HOME ADDRESS: _____
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_____	_____
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PHONE: _____	PHONE: _____
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BIRTHDATE: _____	BIRTHDATE: _____
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- *If any additional space is required, please use back of the application.*

APPLICANT'S SIGNATURE: _____

BUILDING DEPT. APPROVAL: _____ DATE: _____

COMMENTS: _____

RECEIPT #: _____

RECEIVED BY: _____

LICENSE #: _____

ISSUED: _____

DATE: _____

AMOUNT: _____

(\$25.00/new app or \$10.00 renewal)

January 1 – December 31

NEEDED AT TIME OF APPLYING:

*Proof of Insurance
Sign Performance Bond (\$5,000)
Copy of State License
Copy of ALL owner/officers drivers licenses*

