



**Planning and Economic Development  
Licensing and By-Law Services**  
71 Main Street West, 1st Floor, City Hall  
Hamilton, Ontario L8P 4Y5  
www.hamilton.ca/signbylaw  
Phone: (905) 546-2782 Option 3  
Email: signpermits@hamilton.ca

HST# 88932 3218 RT0001

## TEMPORARY SIGN APPLICATION

This form is to be completed and submitted with every Temporary Sign Permit Application. Refer to By-Law 10-197 at www.hamilton.ca.  
Temporary Sign Businesses must have a business licence as per Licensing By-Law 07-170

### FOR OFFICE USE ONLY

PERMIT NUMBER	
PAYER	PERMIT FEE
RECEIPT NUMBER	APPLICATION DATE
PAYMENT TYPE	RECEIVED BY

### Applicant Information

APPLICANT/ORGANIZATION NAME		BUSINESS LICENCE NUMBER (IF APPLICABLE)	
ADDRESS		CITY/PROV	POSTAL CODE
TELEPHONE NUMBER	MOBILE NUMBER	EMAIL ADDRESS	

### Section "A" - Please select the sign you are applying for:

<input type="checkbox"/> A-Frame or Portable Sign	<input type="checkbox"/> New Development Sign	<input type="checkbox"/> Mobile Sign
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### Section "B" - A-Frame or Portable Sign Applications, complete the following:

#### Property Owner (if different than applicant information above)

FIRST NAME	LAST NAME	ORGANIZATION NAME	
ADDRESS		CITY/PROV	POSTAL CODE
TELEPHONE NUMBER	MOBILE NUMBER	EMAIL ADDRESS	

I, \_\_\_\_\_ (please print name) the  Property Owner or the  Property Manager for the owner of the above mentioned property, hereby consent to this application noted above. We also acknowledge that the Property Owner is ultimately responsible for all costs incurred by the City with respect to any enforcement action taken due to the mobile sign. Inspection Fees for non-compliance may be added to the Property Tax Roll.

\_\_\_\_\_  
Signature of Property Owner or Manager

\_\_\_\_\_  
Date

### Sign Information (Location, Details)

ADDRESS		CITY/PROV	POSTAL CODE
NAME OF BUSINESS/ORGANIZATION BEING ADVERTISED ON THE SIGN		BUSINESS LICENSE NUMBER (IF APPLICABLE)	
WORDING ON THE SIGN			

### Section "C" - New Home Development Applications, complete the following:

SUBDIVISION NAME	SUBDIVISION NUMBER
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#### Developer (if different than applicant information above)

FIRST NAME	LAST NAME	ORGANIZATION NAME	
ADDRESS		CITY/PROV	POSTAL CODE
TELEPHONE NUMBER	MOBILE NUMBER	EMAIL ADDRESS	

#### Builder (if different than applicant information above)

FIRST NAME	LAST NAME	ORGANIZATION NAME	
ADDRESS		CITY/PROV	POSTAL CODE
TELEPHONE NUMBER	MOBILE NUMBER	EMAIL ADDRESS	

Sign Information (Location, Details)		
ADDRESS	CITY/PROV	POSTAL CODE
NAME OF BUSINESS/ORGANIZATION BEING ADVERTISED ON THE SIGN		BUSINESS LICENSE NO (IF APPLICABLE)
WORDING ON THE SIGN		

Section "D" - Mobile Sign Applications, complete the following:				
PERMIT START DATE	Check Number of Days Required	7 Days <input type="checkbox"/>	14 Days <input type="checkbox"/>	28 Days <input type="checkbox"/>

Property Owner (if different than applicant information above)		
FIRST NAME	LAST NAME	ORGANIZATION NAME
ADDRESS	CITY/PROV	POSTAL CODE
TELEPHONE NUMBER	MOBILE NUMBER	EMAIL ADDRESS

I, \_\_\_\_\_ (please print name) the  Property Owner or the  Property Manager for the owner of the above mentioned property, hereby consent to this application noted above. We also acknowledge that the Property Owner is ultimately responsible for all costs incurred by the City with respect to any enforcement action taken due to the mobile sign. Inspection Fees for non-compliance may be added to the Property Tax Roll.

_____	_____
Signature of Property Owner or Manager	Date

Sign Information (Location, Details)		
ADDRESS	CITY/PROV	POSTAL CODE
NAME OF BUSINESS/ORGANIZATION BEING ADVERTISED ON THE SIGN		BUSINESS LICENSE NO (IF APPLICABLE)
WORDING ON THE SIGN		

**Section "E" - The following questionnaire must be completed by all applicants:**

**Is the sign as per the following:**

1. Is any part of the property regulated by a local Conservation Authority? YES  NO
2. Is any part of the property regulated by the Niagara Escarpment Commission? YES  NO
3. Is the property within 400 metres of lands regulated by the M.T.O., or visible from the travelled portion of the Lincoln Alexander Parkway or the Red Hill Valley Parkway? YES  NO

**Is the sign to be located as per the following:**

- Min. 15m to an intersection or traffic signal or traffic control device YES  NO
- Min. 3m of a driveway line YES  NO
- Min. 15m to Side Property line abutting a residential property or 3.0m abutting a property any other use YES  NO
- Min. 1.5m to PROPERTY LINE YES  NO
- Is the sign to be located in a required parking space, Greenspace or landscape area (as specified in the Zoning By-Laws or Site Plan Agreement of the City) YES  NO
- Min. 50.0m from any other mobile sign located on the same property YES  NO

**Is the sign to be located on a property with one or more of the following uses:**

- a Single Family, Semi-detached Dwelling, a duplex, triplex, fourplex or quadruplex or street townhouse YES  NO
- a Mobile Home YES  NO
- a Residential Care Facility, Lodging House or Emergency Shelter for 6 or less residents YES  NO

**Section "F" - The following must be submitted with all applications:**

- 1. Insurance Certificate with the following information (except for banners)**
- Commerical General Liability Insurance with a minimum limit of \$2,000,000
  - Endorsed to Include the City of Hamilton as additional insured, and
  - Endorsed to provide the City of Hamilton with at least 30 days notice in writing prior to cancellation, expiration or change of the policy.
- 2. Site Plan**

**Section "G" - A SITE PLAN/SKETCH MUST BE SUBMITTED WITH ALL APPLICATIONS.**

**FAILURE TO SUBMIT A SITE PLAN/SKETCH WILL RESULT IN THE APPLICATION BEING DENIED.**

**By signing below, I am solemnly declaring that I am the  OWNER or the  AUTHORIZED AGENT of the owner above-named, that I have personal knowledge of the particulars above-stated, and that all the information and statements given on this application form and on the drawings and specifications are to the best of my knowledge and belief true, and that I know of no reasons why the permit should not be granted pursuant of this application.**

<b>Name of Applicant (Print Name)</b>	<b>Signature of Applicant</b>	<b>Date</b>
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Personal information required by this form is collected pursuant to the City of Hamilton Sign By-law 10-197 and will be used for permitting purposes. Questions regarding the collection of this information may be addressed to: Licensing and By-law Services, 77 James St. N., Suite #250, Hamilton, Ontario, L8R 2K3. Phone: 905-546-2782 Option 3. Email: signpermits@hamilton.ca.