

CITY OF MILFORD, CONNECTICUT APPLICATION FOR SIGN PERMIT

Permit	No.
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Date:	Estin	Estimated Cost:		Fee:		
PLEASE PRINT	ALL INFORMATIO	N				
a sign or signs as se	ereby applies to the Buildin et forth in the accompanying nce with all local and state	ng drawings and specif	City of Milford for a permit ications showing constructi	for the erection of on and method of		
Location						
Owner	Address					
Tenant	Address					
Wall Sign □	Ground Sign □	Roof Sign □	Projecting Sign 🗆	Pole Sign □		
How many signs v	will be erected	Dimension	s of Sign			
Total Sq. Ft	He	ight of sign from gro	ound	# A BANGE #1999 H		
			ith Metal Frame Other _			
How is sign secur	ed to building		MANAGE OF THE STATE OF THE STAT			
Remarks:			V-1			
Contractor:	Address:(Print Company Name)					
City:	Zip	Telephone:	1			
Applicant:	(Print Name)	Applicant Si	gnature:			
Approved By:	BUILDING INSP	ECTOR	Date:			

This application void if not completely filled out. Permit is void in 6 months if work does not commence.