



**TEMPORARY SIGN PERMIT APPLICATION**

**Planning & Building Department**

150 East Pearl Ave. | ph: (307) 733-0440  
P.O. Box 1687 | [www.townofjackson.com](http://www.townofjackson.com)  
Jackson, WY 83001

**EVENT NAME:**

Event Name: \_\_\_\_\_ Physical Address of Event: \_\_\_\_\_

Description of Event: \_\_\_\_\_

Grand Opening  Yes  No

**EVENT SPONSOR/APPLICANT:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ ZIP: \_\_\_\_\_

E-mail: \_\_\_\_\_ Non-Profit:  For Profit:

**TEMPORARY BANNER LOCATION: Consent from Property Owner Required**

Business/Description: \_\_\_\_\_ Business/Description: \_\_\_\_\_

Physical Address: \_\_\_\_\_ Physical Address: \_\_\_\_\_

Dates of Display: \_\_\_\_\_ Dates of Display: \_\_\_\_\_

Consent from Owner Obtained? Yes  No  Consent from Owner Obtained? Yes  No

Business/Description: \_\_\_\_\_ Business/Description: \_\_\_\_\_

Physical Address: \_\_\_\_\_ Physical Address: \_\_\_\_\_

Dates of Display: \_\_\_\_\_ Dates of Display: \_\_\_\_\_

Consent from Owner Obtained? Yes  No  Consent from Owner Obtained? Yes  No

**SUBMITTAL REQUIREMENTS.** Have you attached the following? Please circle.

Yes / No Illustration of each proposed sign that includes dimensions, colors, materials and type of sign.

Yes / No Installation specifications, and any structural details or specifications required for freestanding signs.

*Under penalty of perjury, I hereby certify that I have read this application and state that, to the best of my knowledge, all information submitted in this request is true and correct. I agree to comply with all county and state laws relating to the subject matter of this application, and hereby authorize representatives of the Town of Jackson to enter upon the above-mentioned property during normal business hours, after making a reasonable effort to contact the owner/applicant prior to entering.*

\_\_\_\_\_  
Signature of Authorized Event Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Name Printed

\_\_\_\_\_  
Title