## CITY OF HAMMOND SIGN PERMIT APPLICATION FILING DATE: \\_\\_\\_

<u>APPLICANT</u> NAME				_				ther	
	First Name	MI		Last Name		Cont	racto	or	
APPLICANT ADDRI	ESS:								
	Str	reet #/Stree	et Name	City		Stat	te		Z
APPLICANT PHONE	E: ()_			FAX: (	)_				
Email:				_					
BUSINESS NAME w	vhere sign w	ill be pla	.ced:						
PARCEL #									
Location where sign w	vill be placed		Ctuan	t Name/Street Numb					
	_								
PROPERTY OWNE	ER:	irst Name		MI		Last	t Name	e	
COMPANY NAME:									
Mailing Address: Street									
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Telephone:(	)			Fax: (	)				_
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PERMIT INFORMA	TION			PERMIT FE	ES:	Permane	ent	\$ 50.0	00
Describe exact location	n of sign:								
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DATE

BUILDING OFFICIAL or BUILDING INSPECTOR or CODE ENFORCEMENT OFFICER