



PLANNING DIVISION
Temporary Banner Permit Application

File Number _____ (for staff use only)

APPLICANT INFORMATION

Business Name _____
Best person to contact. _____
Best way to communicate with this person . _____
Phone Number _____ Email address _____
Physical Address where banner will be displayed: _____
Mailing Address _____
PO Box _____ City _____ State _____ Zip _____

BANNER INFORMATION

Banner Wording _____
Specific Location of Banner _____
(Note: Banners must be located on the premise of the business.)
Size of Banner _____ Area of Banner _____
(Please Note: Banner size cannot exceed 20 square ft on Main St. & 32 square ft on Summit Blvd.)
Dates Banner will be displayed _____
(Please Note: Banners must be removed and/or more banner time must be paid for after the expiration date.)

Banners are administered and paid for in \$5 per week intervals for a maximum of 26 weeks per calendar year.

I AGREE TO REMOVE THIS BANNER ON OR BEFORE THE ABOVE DATE OF EXPIRATION. I UNDERSTAND FAILURE TO DO THIS WILL RESULT IN VIOLATION OF THE TOWN OF FRISCO MUNICIPAL CODE AND I WILL BE SUBJECT TO THE PENALTIES PROVIDED THEREIN.

Applicant's Name (print) _____

Signature _____

For Office Use Only
Approved _____ Disapproved _____ Date _____ Staff _____
Permit Fee _____ Receipt No. _____