

P. O. Box 702, Colfax, CA 95713

## **TEMPORARY EVENT BANNER APPLICATION**

Name of Applicant:		Phone:
Organization/Event:		Event Date:
Mailing Address:		
Name of Property Owner: _		Phone:
Loca	ation of Sign: Colfax Motor L	odge Caboose fence
1	Please Select the Type of Si Size-Sq. ft.	
	<ul> <li>□ Sandwich Board</li> <li>□ Flags/Pennants</li> <li>□ Inflatable Display</li> <li>□ Special Event</li> <li>□ Directional</li> </ul>	
Specify 30-day tin	me period requested: From	To
Applicant's Signature:		Date:
Property Owners Signature: _		Date:
Conditions of Approval:	STAFF USE ONI	
Approved By:		Date:

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