

Returned Check  
# \_\_\_\_\_  
  
Amount \$ \_\_\_\_\_  
Date \_\_\_\_\_

Bond \*       \$25.00  
Fee \*\*       \$10.00  
Check # \_\_\_\_\_  
Amount \$ \_\_\_\_\_  
Date \_\_\_\_\_

## TEMPORARY SIGN PERMIT APPLICATION

Ordinance #4.26, page 14 (8)

# Township of Dryden

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4849 Dryden Road, Dryden, MI 48428 ~ (810) 796-2248 Fax (810) 796-2250  
Supervisor Tina Papineau ~ Clerk Bonnie Rumley CMC ~ Treasurer Carol Stone~  
Trustees Rex Haynes and Geary Priehs

Name of Business \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Name of Owner/Occupant \_\_\_\_\_

Current Zoning Classification of Property \_\_\_\_\_

Description of Sign \_\_\_\_\_  
\_\_\_\_\_

Location of Sign(s) \_\_\_\_\_

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Number of Signs to put up                           1                           2

Number of Days Permit is issued for \_\_\_\_\_ (Max. (30) days).

Permit Expiration Date \_\_\_\_\_

Zoning Administrators approval date \_\_\_\_\_

Signature \_\_\_\_\_

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*\* \*\* Fees & Bonds for Tax Exempt Organizations are waived.*