

## **Sign Variance Application**

Town of Tillsonburg – 10 Lisgar Ave Tillsonburg ON N4G 5A5

PH: 519-688-3009 FX: 519-688-0759

Date received: File Number:		File Number:			Fee: MINOR - \$361.00 MAJOR - \$516.00		
The Corporation of the applies to the Corporation This application for a sign used; letters; numerals; in maximum height, clearan	n of the Town of T n variance shall be nsignia; logo; colo ce and projection	illsonburg for relice accompanied by urs; dimensions on the description of the contract of th	ef, as described in this y a scaled drawing wh of the sign area, sign e copy or wording to b	s application ich will iface, coe displa	ation, from Bylaw No. 379 include information in recopy area and support me ayed; and, all relevant str	98, as amended. gard to material mbers; the	
Applicant is:	Property Ow	ner 🗆	Authorized Age	ent of F	Property Owner		
Building number, street n	ame:				TILLSONBURG	ONTARIO	
Business Name:		Property Zoning Classification:					
Registered Owner:		Telephone Number of Applicant:					
Additional Tenants:				E-ma	il Address:		
Details of Application –	List all required	variances:					
Why is it not possible to	comply with th	e provisions of t	this Bv-law?				
This is it not possible to	oompiy with th	o providiono or t	ino by law.				
Canada narticulare of a	II a:	d <b>f</b> 4b	which the land (attach a	d a a			
General particulars of a	ii signs on or pr	•	•		entation):		
EXISTING: Type of Sign:			PROPOSED: Type of Sign:				
			Dimensions of Sign Structure and Sign Area:				
Location on Property:		L	ocation on Property:				
Authorization of Owner	(to be complete	d only if owner i	s to be represented	by a se	cond party):		
I/We			owner(s) of the pro	operty k	nown as:		
		ereby authorize				to make a minor	
variance application on m	y/our behalf to th	e Town of Tillson	burg.				
Signature of Owner			Sigr	nature o	f Witness		
Owner Phone Number:			Owner E-Ma	il Addr	ess:		
<b>Declaration of Applic</b>	ant		·				
Dated at the							
I,solemnly declare that all s							
true and knowing that it is	of the same forc	e and effect as if	made under oath and	by virtu	ie of the Canada Evidenc	e Act.	
Declared before me at the This	eday of	, 20	in the				
I acknowledge that this a and Fees By-law as ame		accompanied by	payment of the minor	r varian	ce fee in accordance with	the Town Rates	
Signature of Authorized	Agent	-	Signature of applicant				

In submitting this application and supporting documentation, I, as the owner/authorized applicant, hereby acknowledge the above-noted policy and provide my consent, in accordance with the provisions of the Municipal Freedom of Information and Protection of Privacy Act, that the information on this application and any supporting documentation provided by myself, my agents, consultants and solicitors, will be part of the public record and will also be available to the general public.