TOWN OF KIRKWOOD BUILDING AND CODE ENFORCEMENT DEPT.

TELEPHONE:

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E-MAIL: bldgcode@townofkirkwood.org

KIRKWOOD, NY 13795

APPLICATION FOR POLITICAL SIGNS PERMIT

Date:		
Examined by:	Approved:	Disapproved a/c
Sign Permit #:	Dated:	
to the Town of Kirkwood Zoning Ordi	inance for the erec d regulations. No	for the issuance of Political Signs Permit pursuant tion of a sign. The applicant agrees to comply with sign, in any district, shall be erected or altered in the dots by the Enforcement Officer.
Name and Address of Candidate:		
		Telephone:
Tax Map #: (if applicable)		
Name and address to mail permit (if	f different from ab	oove):
		Telephone:
No Fees:		
		Telephone:
Applicant's Name (Please Print)		
Applicant's Signature		