



TOWN OF OCCOQUAN

APPLICATION FOR DISPLAY OF TEMPORARY BANNER

Submit completed applications to the Town Manager.

Town Ordinance, 66-362, a sign permit is required prior to the display and erection of any sign except as provided in Section 66-363 of the article. Banners require a permit.

Banner colors shall be consistent with those recommended in the ARB Design Guidelines. The applicant is limited to four colors per banner, including black and white. ***Actual color samples (paint chip or vinyl swatch) must be included with this application.*** The ARB Design Guidelines are available online at www.occoquanva.gov.

Banners shall be installed in a taut manner to restrict movement and shall be maintained in this manner at all times. Banner permits shall be for 20 consecutive days and no more than twice in one calendar year. Such banners shall be attached to an existing principal structure (with a clearance of at least 12" from the edge of the store or building) or sign pole. They must not obscure architectural features of the building (such as windows, railings or ornamentation) and shall not exceed 16 square feet in total area. They may be hung in a horizontal or vertical manner and shall be attached at all four corners in a taut manner. If after the expiration of the permit such banners are not removed, the town may remove them and charge the costs of removal to the applicant.

The time span to display a temporary banner shall be 20 consecutive days. Each business is limited to two temporary banner permits per calendar year.

Applicant's Name: _____ Business Name: _____

Mailing Address: _____ Business Address: _____

Phone: (_____) _____ Date Submitted: _____

Email: _____

PERIOD OF DISPLAY *(limit of up to 20 consecutive days)*

From: _____ To: _____

Dimensions *(May not exceed 16 square feet)*: _____ Placement: Wall _____ Post _____

Colors (banner and lettering - limit 4 colors - see ARB guidelines): _____

Please attach a sketch or photograph of the proposed banner.

Applicant's Signature

Date Submitted

TOWN USE ONLY

Approved: _____

Disapproved: _____ Reason: _____

Town Manager

Date