

# Finger Directional Sign Application



## Applicant to Complete

Name		
Address/ City/Town		
Telephone number <i>(include area code)</i>	Mobile Number	Email address
Contractor		
Date	Application fee \$200 <i>(excl. manufacture &amp; installation fees)</i>	Receipt number

## Sign Detail

Proposed Wording
Proposed Location
Existing Signage
Location to Existing Signage

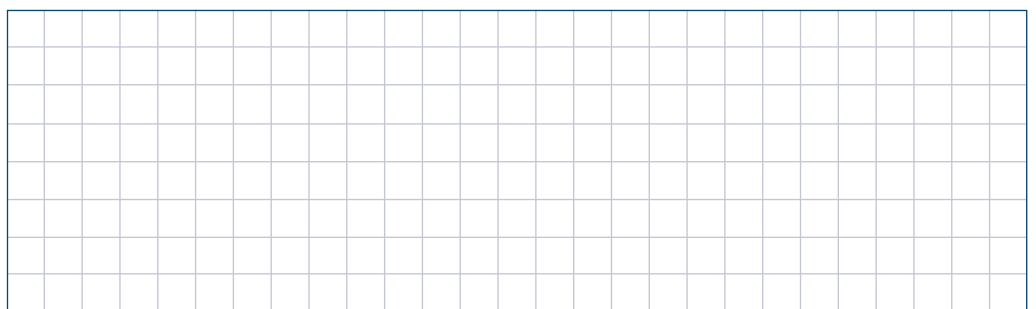
## Site Plan

The proposed application will be undertaken in accordance with the attached standards and conditions.

Signature \_\_\_\_\_

Application complies with definition

YES  NO



*Office  
use only*

DATE RECEIVED		
CONDITIONS/REQUIREMENT		
APPLICANT NOTIFIED	INSTALLATION INSPECTION DATE	INSTALLATION IN COMPLIANCE (IF NO, DETAIL) <input type="checkbox"/> YES <input type="checkbox"/> NO
APPLICANT ADVISED OF NON-COMPLIANCE <input type="checkbox"/> YES <input type="checkbox"/> NO	RE-INSPECTED DATE	COMPLIANCE <input type="checkbox"/> YES <input type="checkbox"/> NO
IF NON-COMPLIANCE PROPOSED ACTION	FILE NUMBER	APPLICATION FORWARD TO COUNCIL FOR FILING <input type="checkbox"/> YES <input type="checkbox"/> NO