CITY OF POOLER

100 SW Highway 80 Pooler, GA 31322 - 912-748-6652 –fax: 912-330-0987
skirby@pooler-ga.gov - www.pooler-ga.us

Sign Permit No:_____

TEMPORARY SIGN PERMIT

APPLICANT (PERSON RESPONSIBLE FOR REMOVING SIGNS UPON EXPIRATION)

_____
Business Occupational Tax #

_____
Business Name

_____ _____
Business Owner or Manager Phone

_____
Business Address City State Zip

_____
Business Mailing Address (If other than above) City State Zip

SIGN LOCATION/DESCRIPTION

_____
Description of sign

_____
Address where sign will be located

Type (check all that apply):

- ☐ Wall Sign/Attached — Area of Sign Face: _____ sq. ft.
- ☐ Ground Sign — Height of Sign: _____feet
- ☐ Banner — Setback from pavement 10 feet or out of right of way, whichever is greater.
- ☐ Other — Please put description below.

_____

The temporary sign permit is valid for 10 days. You must wait 90 days to submit for another temporary sign permit.

Fee: $50.00

Permit begins: Date: _____/_____/_____

Permit expires: Date: _____/_____/_____

APPLICANT SIGNATURE

I hereby certify that all information provided herein is true and correct, and agree to comply with the applicable rules and regulations of the Pooler Zoning Ordinance. I understand that failure to comply with these rules and regulations may result in removal of my signs, and/or issuance of Court Citations as provided in Section 1-12 and will be prohibited from future temporary sign permits for 12 months from the date of the infraction.

_____
Applicant Signature: Business Owner or Owner's Representative Date:____/____/____

Approved by:_____ Date:____/____/____