



**TOWN OF RAMAPO
ROCKLAND COUNTY, N.Y.**

TEMPORARY SIGN PERMIT APPLICATION

DATE ISSUED: _____

FEE PAID: \$250.00

\$100.00 Non-Refundable

\$150.00 Refundable

Separate Checks Must Be Submitted

NAME: _____

ADDRESS: _____

CONTACT TELEPHONE NUMBER: _____

PURPOSE OF SIGN: _____

DATE(S) OF EVENT TO WHICH SIGN PERTAINS: _____

DATE EXPIRES: _____

**ATTACH HERETO A LIST OF NAMES AND ADDRESS OF RESIDENTS WHO GAVE YOU PERMISSION TO
PLACE YOUR SIGN ON THEIR PROPERTY**