

City of Fountain Inn
315 North Main Street
Fountain Inn, SC 29644

Phone: 864-409-3334
Fax: 864-409-3360
PublicWorks77@charter.net

APPLICATION FOR SIGN PERMIT

Street Address: _____

Owner: _____

Phone No: _____ Fax No: _____

Contractor: _____

Address: _____

Phone No: _____ Fax No: _____

Type of Sign: _____

Description of Sign: _____

Dimensions: _____ Material: _____

Number of Signs: _____

Other: _____

Total Amount of Job: \$ _____

*PLEASE NOTE THAT CAMPAIGN SIGNS WILL BE REMOVED BY PUBLIC WORKS
IF NOT REMOVED WITHIN 7 DAYS AFTER ELECTION.*

MUST HAVE WRITTEN PERMISSION FROM PROPERTY OWNER.

*MUST HAVE DRAWINGS. PERMIT WILL NOT BE APPROVED UNTIL DRAWINGS
APPROVED.*

TOTAL AMOUNT DUE: \$ _____

Applicant's Signature: _____

Receipt # _____ Date: _____

Cash _____ Check # _____