



## APPLICATION FOR USE OF ELECTRONIC SIGN

### APPLICANT'S INFORMATION

Today's Date: \_\_\_\_\_

Applicant/Requestor: \_\_\_\_\_

Requested Display Dates: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Email: \_\_\_\_\_

### PROPOSED LANGUAGE FOR MESSAGE:

### APPLICANT'S AGREEMENT

By signing below, applicant states that they have read and agree to the usage policy for the Town of Paxton's Electronic Signage. The applicant understands that any town event or emergency which occurs during the display time will take precedent over any other message.

\_\_\_\_\_  
 Applicant's Signature

\_\_\_\_\_  
 Printed Name

<b>FOR OFFICE USE ONLY</b>	
Date Received:	_____
TA Approval/Rejection:	<input type="checkbox"/> Approved <input type="checkbox"/> Rejection
TA Signature:	_____
Reason for Rejection:	_____