

4. Attach a separate sheet for additional signs.

5. Certification

I certify that I am the applicant seeking this Permit, that all foregoing information is true and I am aware that any falsification on this form and any attachments hereto is cause for revocation of the Permit issued as a result thereof. I hereby agree to be the responsible party for any violation of the Code associated with this license.

Signature of applicant:

Date:

6. Agreements

I, hereby agree to comply with all of the ordinances and amendments thereto, of the City of Haysville and the laws of the State of Kansas, and all the rules and regulations prescribed by the City, and all provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other federal, state, or local law regulating construction or the performance of construction. I agree to notify the City immediately if any information provided on this application shall change at any time prior to or during the term of the permit, and do hereby further consent to the immediate revocation of my Sign Permit, by the City Code Enforcement Department, for any violation of such laws, rules and regulations.

Signature of applicant:

Date:

This document must be acknowledged by a Notary Public before submission to City of Haysville, Kansas.

STATE OF KANSAS)
) SS
SEDGWICK COUNTY)

The foregoing Application for License or Permit was acknowledged before me this _____ day of _____ A.D., 20__ by the individual listed above as the Applicant, and who signed as Applicant, who appeared before me and are personally known by me to be the parties named in the foregoing document,.

Notary Public _____

SEAL

My Appointment Expires: _____

OFFICE USE ONLY

Date Received: _____ By: _____ Fee: _____ Receipt #: _____

Conforming _____ Legal Nonconforming _____ Date of Nonconformance: _____ Reason: _____

Application approved _____ Application disapproved _____ By: _____ Date: _____

Reason (if disapproved): _____