

# CITY OF SPRINGFIELD, OREGON

225 FIFTH STREET • SPRINGFIELD, OR 97477 • PH:(541)726-3753 • FAX: (541)726-3689



Blimp/Pennants/Balloons/Searchlight Permit

City Job Number \_\_\_\_\_

Job Location \_\_\_\_\_

Assessors Map \_\_\_\_\_ Tax Lot \_\_\_\_\_

Owner of Property \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contractor/Installer \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Construction Contractors License # \_\_\_\_\_ Expires \_\_\_\_\_

Description \_\_\_\_\_

Date of Installation \_\_\_\_\_ Date of Removal \_\_\_\_\_

**\$202.00 including \$100.00 Deposit and applicable fees.**

**By signature, I state and agree** that I have carefully completed this application and hereby certify that all information herein is true and correct. I further agree and understand that the above described display will be removed within fourteen (14) days from the date listed as the date of installation above. If the display is not removed within the timeline specified, I will forfeit the \$100.00 deposit. I also understand that this special permit can be issued only once per calendar year per development area. I also agree to call the inspection line at **726-3769** by the end of the 14<sup>th</sup> day to request an inspection to verify the removal of the display. This inspection will begin the process to return the \$100.00 deposit if the display has been removed.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## For Office Use

Date of Application \_\_\_\_\_ Job# \_\_\_\_\_ Receipt# \_\_\_\_\_

Issued By \_\_\_\_\_ Amount Collected \_\_\_\_\_