



# CITY OF DAUPHIN ENCROACHING SIGN LICENSE APPLICATION

100 Main Street South, Dauphin, MB R7N 1K3  
Phone: 204-622-3200 Fax: 204-622-3290

PERMIT # \_\_\_\_\_  
FILE NO. 12. \_\_\_\_\_  
DATE: \_\_\_\_\_

I am the owner of the property involved with this application and hereby apply or authorize the person(s) mentioned below to apply for a license on my behalf to erect, alter or place an encroaching sign in accordance with this application and in accordance with the City of Dauphin Projecting Sign Bylaw #4178 and amendments thereto, and with all other requirements of the City of Dauphin. I, as the owner, also shall indemnify and save harmless the City of Dauphin from all damage and costs caused by or on account of the installation, construction, re-construction, maintenance, and use or failure to maintain any signs on my property. I acknowledge all such liability and indemnity.

Owner of Property: \_\_\_\_\_ Signature: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Phone No.: \_\_\_\_\_

Applicant: \_\_\_\_\_ Signature: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Phone No.: \_\_\_\_\_

Property Where Encroaching Sign Will Be Installed:  
Civic Address: \_\_\_\_\_  
\_\_\_\_\_

Legal Description:  
Lot \_\_\_\_\_ Block \_\_\_\_\_ Plan No. \_\_\_\_\_ D.L.T.O.

Property is Presently Zoned: \_\_\_\_\_

Type of Sign: \_\_\_\_\_

Name, Address(es) and Telephone No.(s) of:

Architect: \_\_\_\_\_

Engineer: \_\_\_\_\_

Designer: \_\_\_\_\_

Installer: \_\_\_\_\_

Sign Surface Area: \_\_\_\_\_ Dimensions: \_\_\_\_\_

Wall Surface Area: \_\_\_\_\_ Dimensions: \_\_\_\_\_

Maximum Height: \_\_\_\_\_ Vertical Clearance to Grade: \_\_\_\_\_

Weight: \_\_\_\_\_ Site Plan Submitted: \_\_\_\_\_

Applicant must provide a sketch drawn to scale giving all dimensions, wording or message involved, maximum height, clearance to grade, and clearance to the outer side of the curb directly in front of the encroachment installation. Details and specifications are also required on all supporting members, fasteners, anchoring devices, connections, foundations, and any other relevant information required in Bylaw #4178.

License Fee: \$

Invoice No.: \_\_\_\_\_ Distribution No.: \_\_\_\_\_

Inspected By: \_\_\_\_\_

\* NOTES: \_\_\_\_\_  
\_\_\_\_\_

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When properly validated (in this space), this is your license.

Validated: \_\_\_\_\_ Building Inspector.

Date: \_\_\_\_\_