APPLICATION TO PLACE BANNER(S) ON SOUTH WESTNEDGE AVENUE PEDESTRIAN OVERPASS

Organization Name:		
Mailing Address:		
Contact Person:	Telephone Number:	
Email:		
Sides of Overpass Requested:	north side only (4 week limit) south side only (4 week limit) both sides (2 week limit)	
Dates requested:		
Describe the contents of the banner(s):		
Who will be erecting and dismantling yo	our banner(s):	
Company/agency providing liability insu	urance:	
	lerk's Office Use Only	
Date Application Received:	Request: Approved	Denied
Comments:		
Signed:	Date:	