

CITY OF BIWABIK
BANNER APPLICATION

Applicant: _____
Contact Information: Mail: _____
Phone: _____
Email: _____

Physical Location of Banner:

Lot(s): _____ **Block:** _____
Plat: _____
Street Address: _____

Square Footage of Banner: _____

Square Footage of Wall Banner is to be Attached to: _____

Dates Banner Will Be Displayed: From _____ **To** _____

Submitted by: _____

Name

Signature: _____ **Date:** _____

Approved: _____ **Date:** _____