



6100 219th Street SW, Suite 200
 Mountlake Terrace WA 98043
 Phone 425.744.6267 Fax 425.775.0420
PermitSpecialist@ci.mlt.wa.us
www.cityofmlt.com

TEMPORARY SIGN PERMIT APPLICATION

Permit # _____

- New, Temporary**
 New, Grand Opening
 New or Existing, Special Event

Business Site Address _____

Property Owner	Business Information
Name _____	Name of Business _____
Address _____	Contact Name _____
City _____ State _____ Zip _____	Mailing Address _____
Phone _____ Fax _____	City _____ State _____ Zip _____
Filing Requirements	Phone _____ Email _____
1. Complete Application	City Business License # _____
2. Plot Plan Showing Location of Signs	Applied Date _____

New Business, Temporary Sign (MTMC 19.135.060.I.a)

(One sign for a maximum of 90 days from date permit is issued. Only applicable during first 6 months of business.)

Type of Sign (circle one)	Date Sign to be Placed	Date Sign to be Removed
A-Board/Sandwich Board or Single Faced Sign (non-illuminated)		

New Business, Grand Opening Signage (MTMC 19.135.060.I.b):

(Maximum 21 days within 1 year from date business license is issued.)

Types of Signs	Size	Date Signs to be Removed

Special Event Signage (MTMC 19.135.060.I.c):

(Maximum 10 days for each event with 45 days between events. Up to 3 events per year.)

Name of Event	Dates of Event
1.	
2.	
3.	

I certify to the best of my knowledge, the information provided on this permit application is true and correct.

Signed: Business Owner / Representative _____ **Date** _____

OFFICE USE ONLY

Application Received By _____ Date _____
 Permit Receipt # _____ Amount \$ _____ Date _____
 Zoning District _____