

# TO THE HONORABLE CITY COUNCIL of the CITY OF LYNN

## SPECIAL PERMIT - SIGN

THE UNDERSIGNED HEREBY PETITIONS YOUR HONORABLE BODY FOR  
A "SPECIAL PERMIT" PURSUANT TO THE PROVISIONS OF  
SECTION 6:00 OF YOUR ORDINANCE REGULATING SIGNS IN THE CITY OF LYNN.

The reason for this request is as follows:

- |   |   |
|---|---|
| <input type="checkbox"/> To permit more than the number of signs allowed by said sign ordinance.                        | <input type="checkbox"/> Check if Billboard |
| <input type="checkbox"/> To permit signs of a greater size or in a location other than required by said sign ordinance. | <input type="checkbox"/> Check if Overhang  |

Name of Business \_\_\_\_\_

Location: \_\_\_\_\_

**PRINT** Petitioner Name: \_\_\_\_\_ Tel. # \_\_\_\_\_

Home Address \_\_\_\_\_ email \_\_\_\_\_

Petition Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Property Owner Information: I assent to above use of premises at above location.**

Print Name	Signature	Date
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Sign Contractor Name \_\_\_\_\_ Tel. # \_\_\_\_\_  
(If known)

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### ***OFFICE USE ONLY***

The following paperwork has been received with application by City Clerk's Office:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Application Fee: \$250.00 | <input type="checkbox"/> Abutters List |  |
| <input type="checkbox"/> Plot Plan & Photographs   |  | Paid by: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card |

**Clerk's Initials:** \_\_\_\_\_

Ward Councilor \_\_\_\_\_

Sign Permit

City of Lynn

PETITION

PERMISSION OF CITY COUNCIL

NUMBER - STREET

SIGN TYPE

NAME OF PETITIONER

IN CITY COUNCIL

DATE

City Clerk

THIS APPLICATION MUST BE SUBMITTED AT LEAST TWO WEEKS PRIOR FOR SIGNATURE

PLEASE TAKE THIS FORM TO: ASSESSOR Rm 202 ~ COLLECTOR Rm 204 ~ TREASURER Rm 206

PARCEL ID \_\_\_\_\_ PP \_\_\_\_\_

TO BE COMPLETED BY THE TAX COLLECTOR:

TAXES OWED ON PROPERTY \$ \_\_\_\_\_ SIGNATURE - COLLECTOR OF TAXES \_\_\_\_\_

TO BE COMPLETED BY THE CITY TREASURER:

TAXES OWED ON PROPERTY \$ \_\_\_\_\_ SIGNATURE - CITY TREASURER \_\_\_\_\_

I agree that should this consent be granted by the Lynn City Council that it will be subject to the payment of property taxes for the within named location.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_