

Sidewalk Permit Application Form

Business Name

Click here to enter text.

Applicant Name & Title (Owner/Manager)

Click here to enter text.

Address

Click here to enter text.

Email

Click here to enter text.

Phone

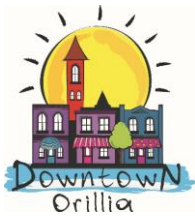
Click here to enter text.

Date Submitted and Signature

Date Submitted:

X

Applicant Signature



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Item to be displayed – Please provide description. Include photo of item and display area including neighbouring businesses' displays

Click here to enter text.

Have you received approval for the item in past years?

Yes No

If yes, provide year(s) approved:

Is the item for sale?

Yes No