

Ordinance # 2012-8-13-1
HAZLE TOWNSHIP TEMPORARY POLITICAL SIGN REGISTRATION

Date _____

Deposit: \$50.00

Name of person responsible for **erecting** signs: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact phone number: _____

Contact E-Mail: _____

Date erecting signs: _____ No. of signs being erected: _____

Location of signs

Name of person responsible for **removing** signs: (if same as above leave blank)

Address: _____

City: _____ State: _____ Zip: _____

Contact phone number: _____

Contact E-Mail: _____

Date removing signs: _____ (Must be within 5 days after the election date)

Describe the general nature and purpose of the signs to be placed:

Will signs be placed in public right-of-ways?

Yes: _____ No: _____

Will Signs be placed on public property?

Yes: _____ No: _____

Deposit required \$50.00

Deposit: _____ Check or M.O.: _____

Hazle Township Official: _____

Deposit will be refunded when Hazle Township has verified that **ALL** temporary political signs have been removed..

I have received a copy of Hazle Township Ordinance # 2012-8-13-1 relating to temporary Political Signs : _____

(Initial)

Inspection of sign removal: Date: _____ All signs removed? _____

Hazle Township Official _____

Refund issued? Yes: _____ Date _____ (Attach bookkeeper request)

No: _____

Reason for refund denial:

