

**LOGANSPOUR STREET DEPARTMENT**

**REQUEST FOR SIGN**

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
(PLEASE PRINT)

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Type of sign: \_\_\_\_\_

Reason for request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Preferred location of sign: \_\_\_\_\_

Residence: Do you: \_\_\_own \_\_\_rent

If this is an issue with neighbors, have you talked with them about the problem? \_\_\_\_\_

1. YOU MUST OBTAIN APPROVAL by the Chief of Police and Street Commissioner

\_\_\_\_\_

Police Chief: Date approved: \_\_\_\_\_ Initial: \_\_\_\_\_

\_\_\_\_\_

Street Commissioner: Date approved: \_\_\_\_\_ Initial: \_\_\_\_\_

Comment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**COMPLETED FORM MUST BE SUBMITTED TO THE STREET DEPARTMENT OFFICE  
BY 9:00 AM MONDAY PRIOR TO THE BOARD OF WORKS MEETING.**

The Board of Works meets each Wednesday at 3:30 p.m. in the City Council Chambers on the 3<sup>rd</sup> floor of the City Building, 601 East Broadway, Logansport, IN.

It is recommended that you attend the meeting in case the Board has questions regarding this request.