TEMPORARY SIGN PERMIT AUTHORIZATION – PUBLIC RIGHT-OF-WAY

RECITALS:

I am the owner or agent for the owner of the business ________________________________________________________ (Business Name)

or property located at ________________________________________________________________ (Address)

in the City of Auburn, Washington.

I seek City of Auburn authorization to place signage in the public right-of-way at

___________________________________________________________

___________________________________________________________ (Address or Nearest Cross Street or Nearest Intersection Quadrant)

*Please attach a map or aerial and mark the specific location of the temporary sign(s)*

I propose to place on private property the following type of signs:

*Please indicate total number of signs and sign size(s), excluding any sign support structures*

**Please attach a photo or drawing of the proposed temporary sign(s)**

A. Special Event Signs (such as posters, flags, balloons/windsocks, pennants, and feather signs): _________________

B. Banners: __________________

C. Portable Signs (such as A-frame and sandwich-board signs): _________________

D. Off-Site Directional Signs: _________________

AGREEMENTS:

1. I agree that this Permit for the signs specified above is subject to the terms of City of Auburn Ordinance Nos. 6263, 6327, 6353, 6403, and 6501, and that I shall abide at all times with these terms. I also agree that I shall remove all signs from the public right-of-way by no later than March 16, 2016, unless otherwise extended by the City.

2. For and in consideration of being given permission to use City right-of-way, I agree to defend indemnify and hold the City of Auburn, its officers, officials, employees, and volunteers harmless from any and all claims, injuries, damages, losses, or suits including attorney fees, arising out of or in connection with placement of the above signs, except for injuries and damages caused by the sole negligence of the City of Auburn.
3. I agree that the City may require me to provide insurance for placing the above signs within the public right-of-way and that if insurance is required by the City as a condition of its approval of this agreement, I shall provide evidence of insurance within ten (10) calendar days of notification by the City that insurance is required.

4. I agree that if the public right-of-way is disturbed or damaged by the placement of the above signs, I shall restore the right-of-way to its previous condition as directed and required by the City.

5. I agree that the authorization for placing the above signs granted by this Permit is wholly of a temporary nature, and vests no permanent rights whatsoever.

6. I agree that this Permit cannot be transferred to another location or to another business or individual.

7. I agree that the City may immediately restrict, suspend, or revoke this Permit without notice if the City determines that the continuation of this Permit constitutes a health or safety hazard or a public nuisance.

8. I agree that the grounds for restricting, suspending, or revoking this Permit shall include, but not be limited to:
   a. Any other license or permit that I am required to have for the same use is not acquired or is suspended, revoked, or canceled.
   b. The applicant has violated or failed to meet any of the provisions of Title 12 (Streets, Sidewalks and Public Works) and Title 18 (Zoning) or is in violation of any other ordinances or regulations of the City relating to the use by me for which this authorization is applied for or issued.
   c. I have failed to meet the conditions of the permit.
   d. The use for which this authorization was approved has changed.
   e. This authorization was issued based on incorrect information supplied by me to the City.

DATED THIS________________________ DAY OF________________ , 20__.

___________________________________________
SIGNATURE OF APPLICANT

____________________________________________
PRINTED NAME OF OWNER OR AGENT

____________________________________________
PRINTED NAME OF BUSINESS (if applicable)

*Approved signs will receive a City sticker that needs to be attached to the sign(s) for identification purposes*

OFFICE USE ONLY

DATE RECEIVED:  ____________________________
RECEIVED BY:  ____________________________

APPROVED ON DATE OF SUBMITTAL:
☐ Yes  ☐ No  Staff Person Initials: ____________________________

RECEIVED & APPROVAL PENDING:
☐ Yes  ☐ No  Staff Person Initials: ____________________________
Date Approved: ____________________________