



# Sign Variance Application

**Town of Tillsonburg – 10 Lisgar Ave  
 Tillsonburg ON N4G 5A5  
 PH: 519-688-3009 FX: 519-688-0759**

Date received:	File Number:	Fee: MINOR - \$361.00 MAJOR - \$516.00
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**The Corporation of the Town of Tillsonburg: Application for a Variance to the Sign By-Law.** The undersigned hereby applies to the Corporation of the Town of Tillsonburg for relief, as described in this application, from Bylaw No. 3798, as amended. This application for a sign variance shall be accompanied by a scaled drawing which will include information in regard to material used; letters; numerals; insignia; logo; colours; dimensions of the sign area, sign face, copy area and support members; the maximum height, clearance and projection; description of the copy or wording to be displayed; and, all relevant structural information.

**Applicant is:**     **Property Owner**                       **Authorized Agent of Property Owner**

Building number, street name:	<b>TILLSONBURG</b>	<b>ONTARIO</b>
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Business Name:	Property Zoning Classification:
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Registered Owner:	Telephone Number of Applicant:
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Additional Tenants:	E-mail Address:
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**Details of Application – List all required variances:**


**Why is it not possible to comply with the provisions of this By-law?**

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**General particulars of all signs on or proposed for the subject land (attach documentation):**

EXISTING: Type of Sign:	PROPOSED: Type of Sign:
Dimensions of Sign Structure and Sign Area:	Dimensions of Sign Structure and Sign Area:
Location on Property:	Location on Property:

**Authorization of Owner (to be completed only if owner is to be represented by a second party):**

I/We \_\_\_\_\_ owner(s) of the property known as:  
 \_\_\_\_\_ hereby authorize \_\_\_\_\_ to make a sign  
 variance application on my/our behalf to the Town of Tillsonburg.

\_\_\_\_\_ \_\_\_\_\_  
 Signature of Owner Signature of Witness

Owner Phone Number:	Owner E-Mail Address:
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**Declaration of Applicant**

I, \_\_\_\_\_ of the \_\_\_\_\_ in the \_\_\_\_\_  
 (name) (town/city) (county)

solemnly declare that all statements contained in this application are true and I make this declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of the Canada Evidence Act.

I acknowledge that this application shall be accompanied by payment of the sign variance fee in accordance with the Town Rates and Fees By-law as amended.

\_\_\_\_\_ \_\_\_\_\_  
 Date Signature of applicant

In submitting this application and supporting documentation, I, as the owner/authorized applicant, hereby acknowledge the above-noted policy and provide my consent, in accordance with the provisions of the Municipal Freedom of Information and Protection of Privacy Act, that the information on this application and any supporting documentation provided by myself, my agents, consultants and solicitors, will be part of the public record and will also be available to the general public.