

CITY OF ST. BONIFACIUS
8535 KENNEDY MEMORIAL DRIVE
ST. BONIFACIUS, MN 55375
(952)446-1061

PORTABLE SIGN PERMIT

PERMIT NUMBER: _____ DATE ISSUED: _____

OWNER: _____ ADDRESS: _____

PHONE NUMBER: _____ PID NUMBER: _____

SIGN LOCATION ADDRESS: _____

Each Portable Sign Permit is good for 15 days from date of issuance.

Four permits are allowed per year; please apply for additional permits.

Please avoid vehicle site line interference.

Amount Paid _____

Signature of City Official

Receipt No. _____

Date: _____

Signature of Applicant