



*Electronic Sign  
Posting Request  
Application*

Date of Application: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Organization Name: \_\_\_\_\_

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

Email: \_\_\_\_\_

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

Nature of the Requested Message: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Requested Text: \_\_\_\_\_

\_\_\_\_\_

Requested Date Range to Post: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

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*Town Use Only:*

Accepted

Actual Text Posted: \_\_\_\_\_

\_\_\_\_\_

Date Range Posted: \_\_\_\_\_

Rejected – Reason: \_\_\_\_\_

\_\_\_\_\_