



420 Nebraska Ave, Breckenridge, MN
(218)643-1431

Temporary Sign Permit

Applicant Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Proposed location of sign: _____

Date of placement: Start _____ End _____

Purpose of sign: _____

Signature of Applicant: _____ Date: _____

Bring in completed form to City Hall to obtain approval.

Permit Valid when signed by Codes Administrator:

Permit approved from: _____ to: _____ inclusive.

Approval Location: _____

Approved by: _____ Date: _____

Special Conditions of Approval: _____