



Mayor Jacquelyn S. Heyward

TOWN OF HOLLYWOOD SIGN APPLICATION

6322 Highway 162, PO Box 519, Hollywood SC, 29449
Office 843-889-32222 - Fax 843-889-3636

To be completed by applicant:

Contractor/ Property Owner: [redacted]
Phone #: [redacted]
Cell #: [redacted]
Location of Property: [redacted]
TMS #: [redacted]

Property Owner (if different from above): [redacted]
Phone #: [redacted]
Cell # / Other: [redacted]
Mailing Address: [redacted]
TMS #: [redacted]

Sketch or Drawing proposed: [redacted]
Dimensions: [redacted] Height: [redacted]
Where will the sign be facing? (location): [redacted]
Where will the sign be posted? (location): [redacted]
Will the sign be attached to existing building? [redacted]
(if "YES" please provide a photograph of existing building)

Signature of Applicant: _____ **Date:** _____

RECEIVED BY: [redacted] DATE: [redacted]

Approved: [redacted] DATE: [redacted]

Planner/Zoning Administrator: _____ DATE: _____