

**City of Olean**  
**Department of Fire, Buildings, & Emergency Services**  
**Code Enforcement Division**

Olean Municipal Building, Rm. 212  
P.O. Box 668, 101 E. State Street  
Olean, NY 14760  
716-376-5683, 716-376-5707 (fax)

**Sign Installer's License Application**

**REQUIREMENTS:** Liability insurance shall be a minimum amount of **\$10,000.00 property damage** and **\$100,000.00 personal injury**. Our office shall be provided with a copy of the Certificate of Insurance.

**FEES:** All persons, firms, and corporations shall obtain a **one-year permit** to install signs in the City of Olean, commencing on the date of issuance. The permit shall be granted upon payment of a fee of **\$200.00** or

Persons, firms, and corporations may purchase a temporary permit granted upon payment of a fee of **\$75.00**. A temporary permit is valid for a **three-month** period, commencing on the date of issuance.

(PLEASE PRINT)

Firm Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_

\*\*\*\*\*

Date application received: \_\_\_\_\_ by: \_\_\_\_\_

Fee of \$ \_\_\_\_\_ PAID

