

Village of Otisville Informational Sign Request

Date: _____

Please fill in the boxes with what you would like the sign to say. Please take into account that you must leave a box blank to represent a space between words, letters and/or numbers.

EXAMPLE:

V	I	L	L	A	G	E		O	F		O	T	I	S	V	I	L	L	E
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Organization: _____

Person's Name Representing Organization: _____

Contact Phone Number: (_____) _____ - _____

Date of Event: _____

Brief Description of Event: _____

Received by: _____

Date: _____ Time: _____