

BURLINGTON TOWN HALL LED SIGN NOTICE REQUEST

NAME OF ORGANIZATION:

CONTACT NAME:

PHONE NUMBER:

INFORMATION TO BE POSTED (WORDS NEED TO BE KEPT TO A MINIMUM DUE TO LIMITED SPACE ON LED SIGN):

START AND END DATE:

To submit this form please save it and email it to selectmenoffice@burlington.gov

FIRST SELECTMAN'S APPROVAL:
