



Community Development

4800 Ashford Dunwoody Road | Dunwoody, GA 30338  
Phone: (678) 382-6800 | Fax: (770) 396-4828

# Special Event Sign Permit Deposit Affidavit

This affidavit must be completed, submitted, and accepted by the City of Dunwoody within seven (7) days of the conclusion of the subject event. The form must be submitted, in person, to the City of Dunwoody during normal business hours unless receipt of the affidavit is otherwise verified in writing by authorized personnel via email or post mail.

Name of Event: \_\_\_\_\_ Event Dates: \_\_\_\_\_

Payable To: \_\_\_\_\_

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

Contact Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Contact Email: \_\_\_\_\_

I certify that all signs associated with this event have been removed:  Yes  No

Affidavit of Sign Removal	
<i>I certify that this sign affidavit is correct and complete. I understand that I am responsible for the removal of all signs associated with the subject event within seven (7) days of the conclusion of the event. I certify that I have verified that all signs have been removed in compliance with all City of Dunwoody Ordinances. I understand that failure to supply all required information will result in the rejection of this affidavit and, likewise, if any information from this affidavit is found to be false, the deposit will be forfeited and/or I may be prosecuted under penalty of law.</i>	
Applicant's Name: _____	
Applicant's Signature: _____	
Sworn to and subscribed before me this _____	Day of _____ 20____
Notary Public: _____	
Signature: _____	
Date: _____	

Departmental Use Only – City of Dunwoody Authorization	
Project Number: _____	
Received by: _____	Date: _____
Received within seven days of conclusion of event? <input type="checkbox"/> Yes <input type="checkbox"/> No Certification: _____	