

CITY OF SYLVANIA - SIGN PERMIT

Date _____

Permit No. _____

WE, the undersigned, owners or their representatives, of the following described property, do hereby apply to the City of Sylvania for a Sign Permit, based on the following information hereinafter set out.

Street Address _____

Legal Description _____

_____ Property Zoned _____

Lot Size _____ x _____ Lot Type: Corner _____ Interior _____ Through _____

<u>Quantity</u>	<u>Type</u>	<u>Dimensions</u>	<u>Sq. Ft.</u>	<u>Height</u>	<u>Illuminated</u>
_____	Low Profile	_____	_____	_____	Yes No
_____	Awning Sign	_____	_____	_____	Yes No
_____	Projecting Sign	_____	_____	_____	Yes No
_____	Area Identification	_____	_____	_____	Yes No
_____	Pylon Sign	_____	_____	_____	Yes No
_____	Canopy or Marquee	_____	_____	_____	Yes No
_____	Window Sign	_____	_____	_____	Yes No
_____	Suspended/Swinging	_____	_____	_____	Yes No
_____	Wall Sign	_____	_____	_____	Yes No
_____	Temporary Sign/Banner	_____	_____	_____	Yes No

Other Conditions or Comments: _____

Owner's Name: _____

Submitted by: _____
(individual or company)

Address: _____
(street, city, state, zip code)

Telephone Number: _____

Applicant's Signature: _____

Issued by: Robert Oberly, Zoning Administrator Date Issued _____

Any permit issued upon a false statement of any fact which is material to the issuances hereof shall be void. 3/2006

Permit Fee \$ _____