Sign Permit #: _____

CITY OF MARYSVILLE

125 E. Sixth Street
Marysville, Ohio 43040
937/642-6015 (fax: 937/642-6045)

Applicant: _____ □ **owner** □ **lessee** □ **other**

Applicant's Address: _____

Applicant's Telephone Number: _____

Owner of Property: _____

Owner's Address: _____

Owner's Telephone Number: _____

Address of Property for Permit: _____

Complete Description of Request: _____

Certificate of Appropriateness required by Historic Uptown Design Review Board **Yes** □ **No** □

Design and layout (photograph and/or drawings to scale) of each sign proposed, including the total area of all signs and the area, height, character, materials, colors and type of lettering or other symbols of individual signs attached; photographs or drawings or surrounding buildings, signs, and uses:
Yes □ **No** □

Site plan showing location of each sign in relation to the building and property attached:
Yes □ **No** □

Width of building or building unit:_____ **Lot width:**_____ **Lot Dimensions:**_____

Description of proposed illumination:_____

Such other matters as may be necessary to determine conformance with and provide for the enforcement of this Zoning Ordinance may be requested by the Zoning Inspector.

- *All Sign Permits shall be conditional upon the commencement of work within six months.*
- *The applicant agrees to properly protect all excavations where applicable.*
- *The applicant agrees to restore all disturbed surfaces to at least their original condition, where applicable.*
- *The applicant agrees to comply with the information contained on this permit; with the plans submitted in accordance with this permit; with the Standard Construction Specifications of the City of Marysville; and agrees to comply with all conditions, modifications, restrictions, and/or regulations of the City of Marysville.*

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Work to begin on or about _____ and will require approximately _____ days.
As the applicant, I attest to the truth and exactness of all information supplied on this application.

Signature of Applicant: _____ **Date:**_____

Sign Permit #_____ **issued by:**

_____ _____ _____
Signature **Title** **Date**