

VILLAGE OF CANAL WINCHESTER

36 SOUTH HIGH STREET
CANAL WINCHESTER, OHIO 43110

PLANNING AND ZONING DEPARTMENT
PH 614.837.7501 FAX 614.837.0145

APPLICATION FOR SIGN PERMIT

Rev. 5/15/2007

Property Owner's Name _____ Address _____ Daytime Phone _____

Applicant's Name _____ Address _____ Daytime Phone _____
(if applicable)

Address of Subject Property _____

Will the requested sign(s) replace any existing signs? _____ Yes _____ No

I am requesting the following type of Sign Permit:		
Wall _____	Free Standing _____	Comprehensive Development _____
Directional _____	Bed and Breakfast _____	Church and Institutional _____
U.S. 33 Corridor _____	Temporary _____	(Banner, Special Event, Portable, Air Actuated)

NOTE: Submit two (2) sets of drawings, three (3) sets if a commercial project, of the requested sign(s) including the following: The location of all existing and proposed sign(s) on the subject property along with all the structures, colors of the sign(s) (including black and white), a scaled elevation drawing of the sign(s) indicating the width and height of the display area, and the total area of each sign (square footage).

I certify that the information provided with this application is correct and accurate to the best of my ability.

Property Owner's Signature **Date**

DO NOT WRITE BELOW THIS LINE

Date Received: ___ / ___ / _____ Fee: \$ _____ Historic District: ___ Yes ___ No
Paid Preservation Area: ___ Yes ___ No

Tracking No.: SP - _____

Application ___ No

Date of Action: ___ / ___ / _____

Approved: ___ Yes

Expiration Date: ___ / ___ / _____

___ Yes, with conditions