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Teri Wise, Village Administrator administrator@centerburgoh.org

SIGN ZONING PERMIT APPLICATION

The undersigned applies for a Sign Permit for the following use, said permit to be issued on the basis of the information contained within this application. The applicant certifies that all information and attachments to this application are true and correct.

Location:

| Property Address: | | Audito | or's Parcel Number(s): | |
|-------------------------|---------------------------|-----------------|------------------------|------------------|
| Applicant (if dif | fferent than Owner): | | | |
| Name: | | | Phone Number/Ext.: | |
| Email Add | ress: | | Fax Number: | |
| Property Owne | r: | | | |
| Na Add | ame: | | Phone Number/Ext. | |
| Address: Email Address: | | | Fax Number: | |
| Contractor: | | | | |
| Name: | | | Phone Number/Ext. | |
| Add | ress: | | | |
| Email Add | ress: | | Fax Number: | |
| Type of Sign: | Sign Height Above Ground: | Sign Face Area: | Type of Sign: | Characteristics: |
| Permanent | Feet | Height | Ground | Single Faced |
| Temporary | Inches | Width | Wall Mount | Double Faced |
| On-Premise | | Square Feet | Projecting | Illuminated |
| Off-Premise | | | Awning | Non-Illuminated |
| | | | Canopy | Other: |
| | | | Pole Mounted | |

Drawings must be submitted showing the following: Location of sign on the site and actual sign including size, color, design elements, materials used for construction of sign.

NOTE: This permit shall be voided if work is not started within one (1) year or completed within two (2) years. Work cannot start until your sign permit application is approved. All signs placed on the ground or anchored into the ground require the Applicant to call for an OHIO UTILITIES PROTECTION SERVIE (OUPS) ticket prior to installation.

See Code: 1117 Signs 1125.02 Definitions and References

Manne Manna Mare www.centerburgoh.org

The Village of Centerburg Planning and Zoning code can be found by visiting www.centerburgoh.org under the Building and Zoning Tab.

I have read, understand, and agree to abide by the terms of this agreement.

| Property Owner's Signature Applicant's Signature | | | | | Date | |
|---|------|----|---------------------------|-----------------|------------------|--|
| | | | | | | |
| Application Number: Date Received: Date of Site Inspection: | | | Fee Paid: OUPS Ticket: | | | |
| Flood Plain Zone: Date of Action on Application: | | No | Contractor Registered: | Yes Approved | ☐ No ☐ Denied | |
| If Application is denied, reason for den | ial: | | | | | |
| | | | | | | |
| Date | | | Zoning Administrator | | | |

Additional Information Required:

