## LAKE TOWNSHIP ZONING DEPARTMENT

12360 Market Ave. N. Hartville, Ohio 44632 (330) 877-9479

## **APPLICATION FOR SIGN CERTIFICATE**

Date:	Receipt No	Parcel No
Location of sig	gn (address):	
Name of Prope	erty Owner:	
Name of Appl	icant:	
Business Nam	e:	
Business Address:		Zip Code:
Business Phone: A		pplicant Phone:
Name of Sign	Company:	
Type of Sign:	1) Temporary a. 16 sq. ft. or under b. 16 sq ft - 32 sq ft	2) Permanent a. Freestanding b. Attached to building c. Plaza sign
Overall Height	t:Total Sq. Ft. of Sign	n AreaValuation of Sign \$
Set Ba Set Ba Left S Right	gn from Property Lines: ack from Right-of-way (front) ack from side road right-of-way ide Yard Set Back: Side Yard Set Back: Yard Set Back:	FeetFeet ( <b>If on a corner lot</b> )FeetFeetFeet
Fee:	Date Fee Paid:	Paid By:
Temp/ Portable	e: Sign Period Begins:	Sign Period Expires:
Applicant Signature		Zoning Administrator
	IOWING THE DESCRIPTION, DIME TH APPLICATIONS.	NSIONS AND LOCATION OF SIGNS MUST BE
SEE ARTICLE V SIGN PLACEME		G RESOLUTION FOR EXACT REQUIREMENTS FOR
TEMPORARY S	IGNS SEE ARTICLE VI SECTION 608	8.

PERMITS EXPIRES ONE (1) YEAR FROM DATE OF ISSUANCE IF CONSTRUCTION HAS NOT

COMMENCED.