

PERMANENT SIGN PERMIT APPLICATION

Harrison Township Development Department
5945 N. Dixie Drive, Dayton, OH 45414
937-890-5611 (p) * 937-454-4831 (f)
www.harrisontownship.org

Date: _____ 20_____

Permit No _____

1. Sign Location _____
Street No _____ Street Name _____

2. Name of Applicant _____
Applicant's Address _____
City _____, State _____, Zip _____, Phone No. _____

3. Occupant's Name _____, Phone No. _____

4. Contractor's Name _____, Phone No. _____

5. Sign Information:

A. Indicate Type of Sign:

_____ Ground Mounted

_____ Wall Mounted

_____ Free Standing

Other, Please Specify _____

B: Indicate Sign Classification:

_____ Directional Sign

_____ Identification Sign

_____ Other, Please Specify _____

C. Number of Sign Faces: () Single () Double () Other _____

D. Sign Illumination: () Internal () External () None

E. Size of Sign (each face): _____ x _____ = _____ sq. ft. per side

F. Setback of Free Standing Sign from Street right-of-way _____ ft.

G. Height of Free Standing Sign _____ ft.

I hereby swear that the information and statements given on this application are true and correct to the best of my knowledge. I understand that if the information in this application is not correct or complete, the result may be the invalidation of this and all subsequent permits issued in conjunction with this Zoning Permit.

Date filled: ___/___/___

Signature of Applicant

TOWNSHIP USE ONLY

Section _____ Town _____ Range _____ Parcel I.D. No. _____

Zoning District _____ Permit Fee \$ _____ Date Issued ___/___/___

Application: () Approved () Disapproved BZA Case No. _____

Remarks: _____

Development Department Director

Date