

ZONING PERMIT APPLICATION
FRANKLIN TOWNSHIP, MERCER COUNTY
SIGNS

Principal Use: _____ Fee: _____ Paid _____ Ck. No. _____
*** Make check payable to: Franklin Township Trustees (6805 St Rt 219, Celina OH 45822)

Permit#: _____

Date Filed: _____

Zoning District: _____

Location of sign: _____

Applicant's name: _____

Applicant's address: _____

Applicant's phone: _____

Property owner: _____

Owner's address: _____

Owner's phone: _____

All applications must be accompanied by the following:

- The actual dimensions of the sign.
- A drawing showing the content and placement of the proposed sign.
- A drawing showing the dimensions and location of streets and driveway(s) for the sign.
- A statement of all signs including design, sign type, height, illumination, support, and materials.

DIRECTIONS TO THE PROPERTY WHERE THE SIGN WILL BE ERECTED, FROM THE NEAREST HIGHWAY, MUST BE PROVIDED.

The applicant hereby certifies that all information on, and attached to this application is true and correct. The applicant acknowledges that all construction will be in compliance with the Construction Standards of Mercer County and all applicable building codes and grants access rights to this property to any zoning personnel for inspection purposes.

OWNER OR OWNER'S AGENT: _____
SIGNATURE

PROPERTY OWNER: _____
SIGNATURE

In issuing this permit the Franklin Township acknowledges that the sign represented herein is in compliance with the Zoning Code of Franklin Township, Mercer County, Ohio. It is the responsibility of the property owner to make sure that the actual construction and use are as stated on this application and plan, and to assure compliance with any other applicable laws.

This permit expires (12) twelve months after its issuance unless construction has begun or in (2) two years of the project is not substantially completed. The decision as to "substantially completed" will be at the discretion of the Zoning Inspector.

ZONING INSPECTOR: _____
SIGNATURE DATE

***IT IS THE REponsIBILITY OF THE OWNER OR CONTRACTOR TO NOTIFY THE ZONING INSPECTOR WHEN THE STAKES ARE PLACED AND THE FOUNDATION IS COMPLETED. NO SIGNS CAN BE CONSTRUCTED UNTIL THE STAKE PLACEMENT HAS BEEN INSPECTED.**

FOR OFFICE USE ONLY

_____ Principal Use Nonconforming (See Section 1139.10)

_____ Modification to Nonconforming Sign (See Section 1139. 14-15)

Attached plan must include: _____ Proposed design _____ Dimensioned site plan
_____ Dimensions and location of all streets and drive(s) from sign _____ Sign
location(s) _____ Elevations of all signs including sign type, height, illumination,
support and materials

Requirements checklist: Visibility maintained _____ yes _____ no (See Section 1129.13)

	<u>Regulations</u>	<u>Application</u>	<u>Staked</u>	<u>Foundation</u>
Total sign area	_____	_____		
Front set back	_____	_____	_____	_____
Side set back	_____	_____	_____	_____
Rear set back	_____	_____	_____	_____
Sign height	_____	_____		
Number of wall signs	_____	_____		
Number of freestanding signs	_____	_____		

Additional requirements/ notes: _____

Application Check: _____ Stake Check: _____ Foundation: _____
Initials Date Initials Date Initials Date

_____ Grant _____ Deny
Comment: _____

