



Department of Building, Zoning & Housing
26789 Highland Road
Richmond Heights, Ohio 44143
216-383-6312 Fax: 216-383-6319
richmondheightsohio.org

SIGN PERMIT APPLICATION

ADDRESS _____

OWNER _____

CONTRACTOR _____

ADDRESS _____

PHONE _____ DATE _____

DRIVER'S LICENSE # _____ STATE _____

TOTAL NUMBER OF SIGNS PLACED ON SITE _____

TYPE OF SIGN: _____

LENGTH _____ x WIDTH _____ = SQUARE FEET _____

PERMIT FEE: \$50.00 PLUS \$2.00 PER SQUARE FOOT

ARB REVIEW FEE: \$100.00 TOTAL FEE: _____

ESTIMATED COST OF SIGN(S) _____

THREE SETS OF PLANS SHALL ACCOMPANY THIS APPLICATION, FOR THE ARCHITECTURAL REVIEW BOARD, AND INDICATE THE FOLLOWING:

- Site Plan
- Distances to all right of ways (ground signs)
- Size of sign(s)
- Method of construction
- Design and colors
- Size of building if sign is to be mounted on fascia
- Color photographs of building

The undersigned hereby agrees to comply with the rules and regulations of the City of Richmond Heights.

APPLICANTS SIGNATURE DATE

APPLICATION # _____ ARB # _____