

BRECKSVILLE PLANNING COMMISSION - REQUEST FOR A SIGN PERMIT

New or Renewal: _____ Location address: _____ Zoning: _____ Vacant lot: _____

Business Name _____ Building Width _____ Unit Width _____

Property Owners name _____ Street Address, City, State, Zip Code _____ Phone # _____

Existing Signs on the Property						
Classification of sign - (Ground, Wall, etc.) See section 1187.03	Height and width of sign	Ground sign: Height from the ground to the top of sign	Ground sign: Setback from the right-of-way	Ground Sign: Setback from the side yard	Sign to be removed	Total area of each sign in square feet per side
						Total area of all existing signs in square feet

A SEPARATE APPLICATION IS REQUIRED FOR EACH PROPOSED SIGN

Proposed Sign					
Classification of sign - (Ground, Wall, etc.) See section 1187.03	Height and width of sign	Height from the ground to the top of a ground sign	Ground sign: Setback from the right-of-way	Ground Sign: Setback from the side yard	Total area of sign in square feet per side

Illumination: _____ What Type: _____ Wattage per Lamp: _____ No. of Fixtures: _____

How will the sign be constructed? _____

What colors will be used? _____

List all Applicable Code Sections and any Deviations			
Code Section	Requirement	Deviation requested	Reason for Deviation

10 assembled packages of information are required for Planning Commission review. **EACH PACKAGE SHALL INCLUDE:**

- A filled out application.
- Building elevation, drawn to scale, showing the location of a wall or window sign.
- Site plan, dimensioned, indicating the sign location, setback from the right-of-way, setback from the center line of the road, and building location.
- Lighting location and light dispersion pattern sketch for any signs to be lighted.
- Sign fully dimensioned including height and width, as well as lettering height and spacing.
- Submit 1 color rendering of the sign, drawn to scale.
- \$25.00 fee due per application at time of submission for Planning Commission review.
- If a Public Hearing is required, a \$50.00 Public Hearing Fee + a \$200.00 Deposit will be required to cover the legal notice in the newspaper. Any unused deposit will be refunded.

SIGN CONTRACTOR:

Company Name _____ Address _____ State _____ Zip Code _____

CONTACT PERSON:

Phone # _____ Fax # _____

Email _____

Date of Application: _____

Fee: \$ _____ Receipt # _____

Approved by: _____ Chairman
_____ Secretary
Date _____

APPLICATIONS WILL NOT BE ACCEPTED UNLESS ALL INFORMATION REQUESTED HAS BEEN PROVIDED