



**CITY OF OBERLIN**  
**SIGN PERMIT APPLICATION**

**APPLICANT INFORMATION:**

**Property Owner Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone No.** \_\_\_\_\_

**Contractor Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone No.** \_\_\_\_\_

**Authorized Agent Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone No.:** \_\_\_\_\_

**PROPOSED SIGN INFORMATION:**

**Municipal Street Address of Proposed Sign:** \_\_\_\_\_

**Zoning (please check one):**

- |  |  |
|--|--|
| <input type="checkbox"/> R-1/Single-Family Dwelling District     | <input type="checkbox"/> R-1A/Single-Family Dwelling District    |
| <input type="checkbox"/> R-1B/Single-Family Dwelling District    | <input type="checkbox"/> R-2/Dwelling District                   |
| <input type="checkbox"/> PD/Planned Development District         | <input type="checkbox"/> P-1/Public Park and Recreation District |
| <input type="checkbox"/> C-1/Central Business District           | <input type="checkbox"/> C-2/General Business District           |
| <input type="checkbox"/> C-3/Planned Highway Commercial District | <input type="checkbox"/> M-1/Light Industrial District           |
| <input type="checkbox"/> CDD/Conservation Development District   | <input type="checkbox"/> O/Office District                       |

**Type of Sign (please check one):**

- Permanent                       Temporary      (Time period to be displayed: \_\_\_\_\_)

**Type of Sign (continued) (please check one):**

Wall-Mounted      Length: \_\_\_\_\_ Width: \_\_\_\_\_ Total Area (sq. ft.): \_\_\_\_\_  
Height of Sign From Grade to Top of Sign: \_\_\_\_\_  
Building Front Wall Width: \_\_\_\_\_

Freestanding Sign      Length: \_\_\_\_\_ Width: \_\_\_\_\_ No. of Sides: \_\_\_\_\_  
Height From Grade to Top of Sign: \_\_\_\_\_  
Setback Distance From Public Right-of-Way: \_\_\_\_\_  
Setback From Other Lot Lines: \_\_\_\_\_

Sign Construction (list type of materials to be used): \_\_\_\_\_

Sign Colors: \_\_\_\_\_

Is sign to be illuminated?       Yes       No

If yes, please describe **in detail** type of illumination to be used (i.e. internal, external, back-lit, etc.): \_\_\_\_\_

Does any portion of the sign move or flash?       Yes       No

If yes, please describe **in detail** the movement (i.e. scroll, flash, time between image changes, etc.): \_\_\_\_\_

Existing Sign Area (in sq. ft.) on Premises:

Wall Mounted Sign(s): \_\_\_\_\_ Freestanding Sign(s): \_\_\_\_\_

Estimated Cost of Sign: \_\_\_\_\_

**REQUIRED SUBMISSIONS:**

- Detailed drawing (**to scale**) of the sign as it will appear on wall of the building or a drawing of the freestanding sign (i.e. dimensions, materials, colors, etc.)
- A site plan providing setback dimensions for any proposed freestanding sign from the edge of the public right-of-way and from the side lot lines.
- **Application fee of \$50.00, plus \$0.50 per square feet of sign surface area.** (Please make check payable to the City of Oberlin).

**APPLICATION AUTHORIZATION:**

If this application is signed by an agent, authorization in writing from the property owner of record is required. Where owner is a corporation, the signature of authorization should be by an officer of the corporation under corporate seal.

\_\_\_\_\_  
Signature of Owner or Agent

\_\_\_\_\_  
Date

**NOTE:** Applicants and/or their Authorized Agents are *strongly encouraged* to attend Planning Commission and Design Review Subcommittee meetings. *Failure to attend those meetings may result in the application being tabled.*

**PERMISSION TO ACT AS AUTHORIZED AGENT:**

As owner of \_\_\_\_\_ (municipal street address of property), I hereby authorize \_\_\_\_\_ to act on my behalf during the Planning Commission approval process.

\_\_\_\_\_  
Signature of Owner or Agent

\_\_\_\_\_  
Date

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**OFFICE USE ONLY**

Date Received: \_\_\_\_\_

Fee Paid:  Yes  No Date: \_\_\_\_\_

Permit No. \_\_\_\_\_