



# CITY OF EUCLID BUILDING DEPARTMENT SIGN PERMIT APPLICATION

\* ~ ~ ~ PLEASE TYPE, OR PRINT CLEARLY ~ ~ ~ \*  
\* ~ ~ ALL FIELDS REQUIRED ~ ~ \*

**\*PROJECT ADDRESS:** \_\_\_\_\_

**\*BUSINESS NAME:** \_\_\_\_\_ **\*PARCEL NUMBER:** \_\_\_\_\_

**\*DESCRIPTION OF SIGN(S):**

Application is hereby made for a permit to erect and maintain (a):

Wall Sign(s)     Ground Sign(s)     Temporary Sign/Banner(s)     Other: \_\_\_\_\_

**Number of signs:** \_\_\_\_\_ **Length:** \_\_\_\_\_ x **Height:** \_\_\_\_\_ = **Area:** \_\_\_\_\_ (square feet)

**Length:** \_\_\_\_\_ x **Height:** \_\_\_\_\_ = **Area:** \_\_\_\_\_ (square feet)

**Length:** \_\_\_\_\_ x **Height:** \_\_\_\_\_ = **Area:** \_\_\_\_\_ (square feet)

**Building or Tenant space frontage:** \_\_\_\_\_ (lineal feet)    **Location of sign(s):** \_\_\_\_\_

**Sign Description** (Provide a complete description of your proposed sign project):

**Is proposed sign to be illuminated?**    Y / N    **If Yes, describe:** \_\_\_\_\_

\*\*\*All electrical work requires a separate permit\*\*\*

**\*TOTAL PROPOSED CONSTRUCTION COST \$** \_\_\_\_\_

**\*IDENTIFICATION AND CONTACT INFORMATION**

	NAME	ADDRESS	CITY	STATE/ZIP	PHONE	EMAIL
<b>OWNER</b>	_____	_____	_____	_____	_____	_____
<b>LESSEE</b>	_____	_____	_____	_____	_____	_____
<b>CONTRACTOR</b>	_____	_____	_____	_____	_____	_____
<b>ARCH / ENG</b>	_____	_____	_____	_____	_____	_____
<b>CONTACT</b>	_____	_____	_____	_____	_____	_____

\*\*\*Please note: Incomplete applications (including those submitted as multiple images) will be returned to the applicant\*\*\*

I hereby affirm the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her agent to conform to all laws of this jurisdiction. Any false statements, false information or omissions shall result in this permit application being deemed null and void.

**Permit must be obtained prior to work. Failure to obtain permits prior to construction will result in penalty as per *Euclid Codified Ordinance 1703.01***

**\*Signature of Applicant, Contractor, or Owner** \_\_\_\_\_ **Federal I.D # if signing for a corporation** \_\_\_\_\_ **\*Application Date** \_\_\_\_\_

**\*ALL FIELDS ON THIS PAGE MARKED WITH AN ASTERISK REQUIRED**  
**FAILURE TO PROVIDE INFORMATION MAY RESULT IN A DELAY OF APPLICATION APPROVAL**

*If submitting application electronically, submit complete application as one PDF file. All others will be returned*

**SEE OTHER SIDE**

