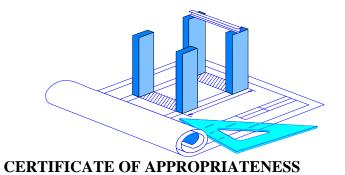
CASE No.____



SIGN APPLICATION

DESIGN REVIEW BOARD/W		
Business Owner:	Phone:	
(Sign location)		
(If different than above)		
Sign Designer/Installer: _		
Address:	Phon	e:
<u>P</u>	Proposed Sign Information	
Size:	Colors:	
Lettering/Logo:		
Lighting: Yes / No If ye	es, Type:	
Position on Building or Grounds:	:	
Material to be used:		
Lineal feet of sign wall/building_		
descriptions to: Warren R	with photographs, drawings, sketches or Redevelopment and Planning Corp. 333 Harmon Ave NW Warren, Ohio 44483 330-841-2566 Fax: 330-841-2738	detailed
Date Received	Applicant (Business Owner) Building Owner	Date Date