



CITY OF NAPOLEON
 BUILDING & ZONING DEPARTMENT
 255 W. Riverview Avenue, PO Box 151, Napoleon, OH 43545
 Phone: 419-592-4010 - Fax: 419-599-8393

P-116-0196

APPLICATION FOR SIGN PERMIT

LOCATION OF PROPERTY: 1255 SCOTT ST

OWNER NAME: TRI STATE MEDICAL PHONE: _____

OWNER ADDRESS: _____

CONTRACTOR NAME: RISW SURPRISES PHONE: 419-446-2972

IS CONTRACTOR REGISTERED WITH THE CITY OF NAPOLEON? YES NO

SIGN INFORMATION

TYPE: POST WALL GROUND AWNING

DIMENSIONS: 4' x 24' = TOTAL S.F. 96

** PLEASE INCLUDE ANY AND ALL SITE PLANS AND PLANS OF ABOVE SIGNS.

FEES:

\$35.00 BASE UP TO 50 S.F. OF SIGN, PLUS \$0.20 PER ADDITIONAL S.F., NOT TO EXCEED \$150.00 (100-3100-46610)

\$5.00 FLAT FEE FOR TEMPORARY SIGNS, TEMPORARY SPECIAL EVENT SIGNS, AND PORTABLE SIGNS OTHER THAN THOSE EXEMPT FROM FEE. (SEE BELOW)

NO FEE REQUIRED FOR TEMPORARY AND EASILY REMOVABLE 1ST AMENDMENT SIGNS, OR SIGNS RELATED TO RELIGIOUS OR CHARTIABLE CAUSES OR EVENTS.

ESTIMATED CONSTRUCTION COST \$ 1500.00

[Signature]
 APPLICANT SIGNATURE

6-23-16
 DATE

Batch 34558 Check total Date _____

\$44.20



Sign is 4' x 24' - MADE FROM 1/4" 4X8 PANELED
THAT ARE 2 SKINS OF ALUM. SPACED BY A SOUND
PURTRIC CORE.