City of Conneaut Sign Permit Application 294 Main Street

Conneaut, Ohio 44030

Telephone: 440-593-7406 Fax: 440-593-6908 E-mail: conneauthz@conneautoh.org

Date of Application:	Zoning	District	Permit #	
Job Location		· .		
Property Owner	Applicant Name (if different than owner)			
Street Address & Job Location (street number & name)		Phone	Phone Number	
Contractor Information Name of Owner or Company	T)2T A 7.7			
or company	Email Addr	ess		
Address (street number & name)	City	City State & Zip Code		
Phone Number with area code	Fax Number	Cell Phone	Cell Phone No.	
Requirements				
Site plans must be attached to	how it will be anchored to found to application - Sign Permit Fee S se call the Zoning Administrator	640.00 or at 440-593-7406 or refer to	section 1133.05 of the Conneau	
Applicant Signature	· .	Da	ite	
70 00	New Sign			
Type of Sign	Length & Width	Total Sq. Ft.	Height	
Type of Sign	Existing Sig	Total Sq. Ft.	Height	
			redant	
			· · · · · · · · · · · · · · · · · · ·	
A	Department Us	se Only		
Approved	Reason for Denial			
Denied			1	
Zoning Administrator	· .	***************************************		
S - SWILLIAM CLUI		Date		