

Orange Township Zoning Office
1680 East Orange Road
Lewis Center, OH 43035-9502
Phone: 740.548.5430
Fax: 740.548.7537



DATE ISSUED: _____
PERMIT NUMBER: _____
FEE: _____ CH No: _____

SIGN APPLICATION FOR ZONING PERMIT

NAME OF OWNER: _____

ADDRESS: _____ CITY/STATE: _____ ZIP: _____

BUILDER: _____ PHONE: _____ FAX: _____

ADDRESS: _____ CITY/STATE: _____ ZIP: _____

ADDRESS OF PROPERTY: _____ CITY/STATE: _____ ZIP: _____

RANGE: 18 TWP: 3 SECTION: _____ FARM LOT NUMBER: _____

SUBDIVISION NAME: _____ PHASE NUMBER: _____

INLOT NUMBER: _____ ACREAGE: _____

ZONING DISTRICT: _____ PRESENT USE: _____

TEMPORARY—SIX (6) MONTHS SIGN: _____

PERMANENT SIGN: _____ PARCEL NUMBER: _____

TYPE OF SIGN: _____

SET BACK FROM PROPERTY LINE: _____ FEET: _____

HEIGHT: _____ AREA: _____ SQUARE FEET

SIDE YARD WIDTH: _____ RIGHT _____ LEFT

APPLICANT CERTIFIES THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND ACCURATE AND IS SUBMITTED TO INDUCE THE ISSUANCE OF THE ZONING PERMIT. APPLICANT AGREES TO BE BOUND BY THE PROVISIONS OF THE ZONING RESOLUTION OF ORANGE TOWNSHIP, DELAWARE COUNTY, OHIO.

DATE: _____ APPLICANT: _____

SIGNATURE

ATTACH SUCH PLATS AND PLANS AS REQUIRED BY THE ZONING INSPECTOR AND /OR THE PROVISION OF THE ORANGE TOWNSHIP ZONING RESOLUTION.

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED