

MULTIPLE SIGN FORM (To be attached to Application for Sign Permit) CITY OF MAUMEE – DIVISION OF ZONING 400 CONANT STREET, MAUMEE, OH 43537 19 897 7074 EAX: 419 897 7182 EMAIL: ZONING@MAUN

OFFICE: 419-897-7074 FAX: 419-897-7182 EMAIL: ZONING@MAUMEE.ORG

SIGN NUMBER TYPE: (check one) []WALL []GROUND []PROJECTING []MARQUIS []FACE CHANGE []TEMPORARY SIGN HEIGHT ABOVE GRADE: _____ ABOVE CURB (Arrowhead Architectural District only): ____ SET-BACK FROM PROPERTY LINE: ______ TOTAL SQUARE FOOTAGE OF BUILDING OR LEASED SPACE: ___ TOTAL LINEAR FOOTAGE OF FAÇADE THAT SIGN WILL BE MOUNTED TO (or width of tenant space): ____ ______ TYPE OF BUSINESS: (check one) [] NEW [] EXISTING TOTAL SQUARE FOOTAGE OF SIGN: TOTAL NUMBER OF OTHER SIGNS AT THIS BUSINESS OR PROPERTY: (existing) _____WALL ____GROUND ____PROJECTING _____MARQUIS ____OTHER SIGN NUMBER

 TYPE: (check one)
 [] WALL
 [] GROUND
 [] PROJECTING
 [] MARQUIS
 [] FACE CHANGE
 [] TEMPORARY

SIGN HEIGHT ABOVE GRADE: ______ ABOVE CURB (Arrowhead Architectural District only): _____ SET-BACK FROM PROPERTY LINE: ______ TOTAL SQUARE FOOTAGE OF BUILDING OR LEASED SPACE: ______ TOTAL LINEAR FOOTAGE OF FAÇADE THAT SIGN WILL BE MOUNTED TO (or width of tenant space): ______ TOTAL SQUARE FOOTAGE OF SIGN: ______ TYPE OF BUSINESS: (check one) [] NEW [] EXISTING TOTAL NUMBER OF OTHER SIGNS AT THIS BUSINESS OR PROPERTY: (existing) ____ WALL ____ GROUND ____ PROJECTING ____ MARQUIS ____ OTHER SIGN NUMBER TYPE: (check one) [] WALL [] GROUND [] PROJECTING [] MARQUIS [] FACE CHANGE [] TEMPORARY SIGN HEIGHT ABOVE GRADE: _____ ABOVE CURB (Arrowhead Architectural District only): ____ SET-BACK FROM PROPERTY LINE: ______ TOTAL SQUARE FOOTAGE OF BUILDING OR LEASED SPACE: ___ TOTAL LINEAR FOOTAGE OF FAÇADE THAT SIGN WILL BE MOUNTED TO (or width of tenant space): ______ _____ TYPE OF BUSINESS: (check one) [] NEW [] EXISTING TOTAL SQUARE FOOTAGE OF SIGN: _____ TOTAL NUMBER OF OTHER SIGNS AT THIS BUSINESS OR PROPERTY: (existing) _____WALL _____GROUND _____PROJECTING _____MARQUIS _____OTHER