



CITY OF PARMA HEIGHTS
DEPARTMENT OF PUBLIC SERVICE

APPLICATION FOR SIGN PERMIT

Business Information	
1. Business Name	
2. Proprietor's Name	
3. Address	
4. Phone Number	
5. Email	

Property Owner Information	
3. Property Owner Name	
4. Address	
5. Phone Number	
6. Email	

Sign Contractor Information	
7. Name/Firm	
8. Address	
9. Phone Number	
10. Email	

*Electrical Permit Required

Permit Type				
Type	Type of Sign	Size	Height	Estimated Value \$
<input type="checkbox"/> Sign		_____ x _____		
<input type="checkbox"/> Temporary Sign (30 days)				

Specifications	
Location of the sign	
Total area of sign/Square feet	
Setback from centerline	
Frontage (business, building, or lot applicable)	
Total allowable area of signage	
Total number of signs	
Illuminated	



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Application Fees

All appropriate fees and plans shall be submitted with application. Fees are not refundable. Any alteration to the original proposal will, at the discretion of the Director of Public Service, be considered a new proposal and will be charged accordingly.

Re-Inspection Fee: A fee of fifty dollars (\$50.00) shall be charged for each additional re-inspection.

Plan Changes: An additional fee of 50% of the original permit

Work Without Permit: The permit(s) cost shall be doubled for work begun or completed without obtaining a permit.

Applicant's Initials

Acknowledgement & Signature

Application is hereby made for permit to do work as described. The acceptance of the permit herein applied shall constitute an agreement on the part of the undersigned to abide by all the conditions therein contained; and to comply with all ordinance of the City of Parma Heights and the laws of the State of Ohio relating to work to be done thereunder and said agreement is a condition of said permit.

It is the applicant's responsibility to review and comply with all mandates of the Parma Heights Codified Ordinances relative to this application request. Parma Heights Codified Ordinances can be found on the City's website at www.parmaheightsoh.gov.

All inspections needed will be listed on the permit. All inspections must be scheduled at least 24 hours in advance.
Permit number required to schedule inspections.

Applicant Name (print):

Signature of Applicant:

Date

Office Use Only

Permit Number	
Permit Fee	
Permit Date	
Building Code	
Tax	3%
Electrical Permit	

Official Use Only



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SIGN PERMIT SCOPE OF WORK

Ground Sign	
Total height of sign	
Total height allowed	
Sign base height	
Total Existing width of building	
Measurement from street right-of-way line	

Canopy	
Height from grade to bottom of canopy	
Show lettering information if any on canopy	Yes No

Window Sign	
Size of sign	
Size of window	
Number of windows	
Placement	
Number of existing signs	

Wall Sign	
Measurement from inside walls (sign to be 3' off each wall)	
Measurement from wall (distance away from wall)	

Show the following on drawings	
Measurement from interior driveway	
Measurement from property line	

