



Application for Zoning Certificate – Permanent Signs

DEPARTMENT OF COMMUNITY DEVELOPMENT

697 Neeb Road, Cincinnati, Ohio 45233

Phone: (513) 922-2705 Email: zoning@delhi.oh.us

**** PLEASE READ BEFORE COMPLETING THE APPLICATION ****

- Signs also require a building permit from Hamilton County Buildings & Inspections. For details, please contact:
 - Hamilton County Buildings & Inspections (513) 946-4550.
 - It is the responsibility of the applicant to file all necessary application materials with the previously listed agency, if required.
 - The listed agency is notified of all approved Zoning Certificates.
- All projects related to this zoning certificate shall be conditional upon the commencement of work within six (6) months, and may be revoked if work has not been substantially completed within eighteen (18) months.
- The applicant agrees to properly restore all disturbed surfaces to their original condition.
- Applicant shall call for inspection once the project(s) complete. Minimum 24-hour notice is required.
- Failure to submit a complete application, including fees, may result in the delay or denial of the application.
- Applicant/property owner are responsible for property line verification prior to construction.
- Delhi Township is not responsible for structures placed within any easement.
- Applications shall be either approved or denied within three (3) to five (5) business days after receipt of a complete application.

Applicant Information *(Please print clearly)*

Applicant: _____ Owner Agent Tenant Other
 Company: _____
 Applicants Street Address: _____
 City, State, and Zip Code: _____
 Telephone Number: _____ Email: _____

Project Site Information *(Please print clearly)*

Address for Permit: _____ Property Zoning District: _____
 Owner of Property: _____
 Owner's Street Address: _____
 City, State, and Zip Code: _____
 Telephone Number: _____ Email: _____
 Description of Project: _____
 Work to begin on or about _____ and will require approximately _____ days.

In addition to completing the information on page one (1) of this application, you are required to submit the following are planned, please complete each applicable section:

Permanent Signs: (Residential/Non-Residential)

- Four (4) or six (6) complete sets of drawings (the number required by Hamilton County, plus one set for the Township), including site plans and construction drawings.
- Site plans shall include the actual dimensions and shape of the lot, and show the location and setbacks from all property lines for existing and proposed structures.
- Construction drawings shall indicate, for each proposed sign, elevations showing the signs' design & layout/square footage/height, description of proposed illumination (interior/exterior), and grading plan (as warranted).
- For all lit signs, a photometric drawing showing the proposed footcandle measurement at all property lines.
- Photographs, dimensions and square footage of all existing signage located on the property including wall, window and freestanding signs.

Total Cost of Improvements: \$_____

Applicants Notes:

The applicant agrees to comply with:

- **The information contained on the approved permit.**
- **The plans submitted in accordance with the approved permit.**
- **All modifications, restrictions and/or regulations as assigned by the Delhi Township Department of Community Development, and Hamilton County Buildings & Inspections.**
- **Making request for a Final Inspection of approved improvements toward the issuance of Certificate of Compliance and grants to the Township permission to access the subject property so as to make inspections.**

Applicant understands that any violation of the Delhi Township Zoning Resolution, any false information on this application, and any occupancy before final inspection has been made and a Certificate of Compliance is issued will result in penalties as provided in the Delhi Township Zoning Resolution.

I hereby attest to the truth and exactness of all information supplied on and with this application.

Signature of Applicant: _____ Date: _____

Signature of Tenant/Occupant: _____ Date: _____

Signature of Owner: _____ Date: _____

FOR OFFICE USE ONLY

Received Stamp:

Fees:

New Sign: \$100 + Sq. Ft. _____ x \$1.50 _____

Face Change: \$100 + Sq. Ft. _____ x \$1.00 _____

Fees Doubled (per Section 22.6, G)

Total Fees Due: _____

Zoning Reviewer Notes:

Permit Approved: _____

Permit Denied: _____

Reason for Denial (if applicable):

Permit Issued By:

Date: