



WEST ALEXANDRIA

1 Water Street, West Alexandria, Ohio 45381

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JEFF HICKEY, Mayor

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AUSTIN HUTCHISON, Village Administrator

937-300-8400 • va@westalexoh.com

PROJECT SPECS.	SITE ADDRESS: _____ OCCUPANT: _____
	PROJECT DESCRIPTION: _____
	NUMBER OF SIGNS, _____ NEW SIGN _____ REPAIR/REPLACE SIGN _____ TEMP. SIGN _____
	SQUARE FEET: SIGN #1 _____ SIGN #2 _____ SIGN #3 _____ SIGN #4 _____
	ILLUMINATED SIGN(S)? _____ YES _____ NO
OWNER	NAME: _____ ADDRESS: _____
	CITY, STATE, ZIP: _____
	PHONE: _____ EMAIL: _____
PLAN BY	NAME: _____ ADDRESS: _____
	CITY, STATE, ZIP: _____
	PHONE: _____ EMAIL: _____
CONTRACTOR	NAME: _____ ADDRESS: _____
	CITY, STATE, ZIP: _____
	PHONE: _____ EMAIL: _____

All information contained in this application is true, accurate and complete to the best of my knowledge and I, the "Applicant" as the owner's authorized agent, do hereby agree to complete the project in compliance with relevant building and zoning codes.

APPLICANT SIGNATURE: _____ DATE: _____

FOR INTERNAL USE ONLY DO NOT WRITE HERE

PAYMENT: \$ _____ RECEIVED BY: _____ PAYMENT TYPE: _____