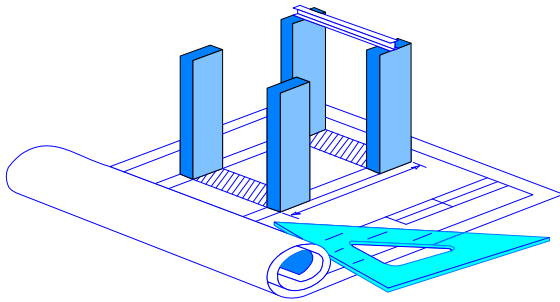


CASE
No. _____



CERTIFICATE OF APPROPRIATENESS

SIGN APPLICATION

DESIGN REVIEW BOARD/WARREN REDEVELOPMENT & PLANNING CORP.

Business Owner: _____ Phone: _____

Business Address: _____
(Sign location)

Building Owner: _____
(If different than above)

Sign Designer/Installer: _____

Address: _____ Phone: _____

Proposed Sign Information

Size: _____ Colors: _____

Lettering/Logo: _____

Lighting: Yes / No If yes, Type: _____

Position on Building or Grounds: _____

Material to be used: _____

Lineal feet of sign wall/building _____

Please submit application along with photographs, drawings, sketches or detailed descriptions to:

Warren Redevelopment and Planning Corp.
333 Harmon Ave NW
Warren, Ohio 44483
Phone: 330-841-2566 Fax: 330-841-2738

Date Received

Applicant (Business Owner) Date

Building Owner Date
For approval of sign and placement on the building.