

CITY OF COLUMBIA CITY
1840 Second Street - PO Box 189 - Columbia City, OR 97018
Phone: (503) 397-4010 Fax: (503) 366-2870
E-mail: colcity@columbia-city.org

SIGN REQUEST APPLICATION

APPLICANT _____ PHONE _____

MAILING ADDRESS _____

PROPERTY OWNER _____ PHONE _____

MAILING ADDRESS _____

REQUEST _____

LOCATION _____

ZONE DESIGNATION _____

LEGAL DESCRIPTION _____

A sign request application shall be submitted and processed in accordance with Chapter 7.102 of the Columbia City Development Code, see attached copy of code. Application forms must be accompanied by a fee in the amount of \$50.00 for each sign.

SIGNATURE (applicant) _____ DATE _____

SIGNATURE (owner)(agent) _____ DATE _____

*****OFFICE USE ONLY*****

Date Filed _____ Fee Paid _____ Receipt No. _____

- Drawing Received including: colors, lettering, symbols, logos, materials, size and area
- Elevation and Plot Plan Received including: sign location on structure or lot, method of illumination, if any, and similar information.

MUNICIPAL APPROVAL

SIGNATURE _____ DATE _____