



**IV. FEES**

Permit Fee: **\$10 Residential**                      **\$20 Commercial**

**APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST BE PROVIDE THE FOLLOWING INFORMATION:**

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent, and we agree to conform to all applicable Zoning Ordinance of Carrollton Township. All information submitted on this application is accurate to the best of my knowledge.

I hereby grant Carrollton Township personnel involved with the review of this application permission for reasonable entry onto the above property for investigation specifically related to this application.

**SIGNATURE OF APPLICANT:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**V. THIS SECTION TO BE FILLED OUT BY THE BUILDING DEPARTMENT**

	<b>Residential</b>	<b>Agriculture</b>	<b>Commercial</b>	<b>Industrial</b>	<b>Approved</b>	<b>Disapproved</b>
<b>A. Zoning District</b>						

Comments Regarding Zoning:

**B. Set Backs for Proposed Sign:**

Proposed Right of Way \_\_\_\_\_ Front \_\_\_\_\_ Rear \_\_\_\_\_ Sides \_\_\_\_\_

Zoning Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_