CITY OF ROCKY RIVER
21012 HILLIARD BOULEVARD
ROCKY RIVER, OH 44116
PHONE: (440) 331-0600

Sign Permit Application	**Submission Date:**
	Design Board Review Date:

Address of Sign Location: 20015 DETROIT RD

Business Name/ Ownership: MIKE SANCHEZ (Name) — 440-331-4045 (Telephone No.)

20033 DETROIT RD (Address) — 44116 (Zip)

Sign Erector: SIGNATURE SIGN CO (Name) — 216 426-1234 (Telephone No.)

1776 E 43RD (Address) — 44103 (Zip)

Sign Erector's Email Address: JAMES@SIGNATURESIGNCOMPANY.COM

Registered Contractor in Rocky River ☐ yes ☒ no *See Contractor Registration Application*

Sign Type:			***Sq. Ft Each Sign***	**TOTAL SQ. FT. ALL SIGNS:**	62.81
	Wall	☒	**Sq. ft:** 62.91		
	Projection	☐	**Sq. ft:**	**Ground Sign Height:**	
	Ground	☐	**Sq. ft:**	**Bldg. Front Setback:**	
	Electronic	☐	**Sq. ft:**	**Sign Cost:**	
	Pylon Panel	☐	**Sq. ft:**	**Variance Req'd?** ☐ yes ☐ no	

SIGN ILLUMINATION METHOD:

In addition to this application, please submit three (3) sets of sign specs. made to scale. Specs must show the design and layout proposed, including the total sq. ft. of the sign, the size, dimensions, character, color of the letters and the background, lines and symbols; the method of illumination, if any; details and specifications for construction, erection and attachment, as well as a site plan for monument signs showing the exact location of the sign on the property, including the dimensions from property lines. Also, a photograph of the sign's proposed location with the sign superimposed on the photograph shall be submitted for all sign applications. Ground Signs must be accompanied by a Landscaping Plan (including year-round greenery). All structural materials and methods of construction must be detailed in drawings and sufficient for the purpose intended, as approved by the Building Commissioner.

As owner of this sign, I am familiar with the proposed project and agree to conform to all applicable laws of the City of Rocky River.

Signature of Business Owner: MS

Signature of Sign Erector: James Vance

Signature of Building Owner: MS

For office use only:

Sign Area: _____ Signable Area: _____ Coverage: _____

Approval Date _____ SIGN PERMIT FEE: _____ PERMIT # _____

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ROCKY RIVER, OH 44116
PHONE: (440) 331-0600 FAX: (440) 895-2628

APPLICATION FOR DEVELOPMENT PLAN REVIEW

See Chapter 1127, Rocky River Codified Ordinances

Date: 12-30-24

Location of Project: 20015 DETROIT RD _____ (P.P. Nos.)

Present Use: N/A Proposed Use: MESSAGE & WELLNESS CENTER

Owner: MIKE SANCHEZ (Name) 20033 DETROIT RD (Address & Zip) 440-331-4045 (Tel No.)

Engineer: _____ (Name) _____ (Address & Zip) _____ (Tel No.)

Architect: SIGNATURE SIGN CO. (Name) 1776 E. 43RD (Address & Zip) 216-426-1234 (Tel No.)

Gross Land Area: N/A Acres _____ sq. ft.

Building Area (Including Detached Accessory Buildings) _____ sq. ft.

Parking Spaces: EXISTING (Enclosed) + _____ (Unenclosed) = Total: _____

Estimate of traffic volume to be generated by this project: _____

Cost estimate (include all public & private improvements): $ 18,948.00

Standards for construction of driveways, public & private streets, sidewalks, parking & loading areas and fire lanes.

Methods and standards for maintenance of private streets, driveways, open spaces, parking areas, common land, garbage and waste disposal.

MS (Owner's Signature) MIKESANCHEZ111@GMAIL.COM **(Contact E-Mail Address)**

PLAN REVIEW NOTES:

Planning Commission:
$150 Application Fee Paid: _____ (Date)
Plan Exam Fee $

This application must be accompanied by ten (10) sets of plans, as follows (see Sec: 1137).