INFORMATION FOR SIGN ERECTOR CONTRACTOR APPLICATION:

Section 3381 of the Columbus Code requires the following be presented in order to apply for Board approval of a General or Limited Sign Erector contractor license.

Sign Erector Contractor Application; Completed and notarized application must be submitted no later than seven (7) days prior to the board meeting. The tentative meeting schedule for the Board of Sign Erectors is the 1st Tuesday of every month.

Applicants are required to attend the Sign Erectors board meeting which takes place at 3:00 pm in Room 203 at the Department of Building & Zoning Services, 111 N Front Street, Columbus, Ohio 43215.

Exhibits/photos detailing the actual signs farbicated, erected or otherwise installed by the applicant

NOTE:

Please review all information and have your application notarized before filing for a license. If the application is not notarized, all documents will be returned without being processed. Applicant must possess the required experience as stated within this application.

Upon Board approval, the applicant will receive notification by certified mail with instructions on how to complete the remaining steps in the licensing process. Please do not come in for License processing until you have received approval notification by mail.

BOARD APPLICATION FEE

Non-Refundable \$250.00 filing fee

Application may be submitted to:

BZSLicensing@Columbus.gov (you will receive an email containing a link to pay the fee online)

-OR-

City of Columbus - Department of Building & Zoning Services 111 N Front Street Columbus, Ohio 43215

Checks are to be made payable to Columbus City Treasurer

For additional information, contact the Customer Service Center at bzslicensing@columbus.gov or (614) 645-7433 or visit us online at www.columbus.gov/bzs.

Columbus Zoning Code, Section 3381.12: Qualification of Applicant

- (A) An application for a license as a limited sign erector shall have a minimum of three (3) years experience in erection and fabrication of signs.
- (B) An applicant for a license as a general sign erector shall have a minimum of five (5) years experience in erection and fabrication of signs.
- (C) The applicant for either license who does not meet the requirements of A or B above may present a complete statement of qualifications to the board for its consideration. If the board determines that such person is qualified by reason of experience, training, or education or any combination thereof, it shall certify the name of the eligible applicant to the department.
- (D) A **limited sign erector** shall only engage in the erection, maintenance and removal of painted and non-illuminated graphics no more than sixty-four (64) square feet in area, limited to sixteen (16) feet in height, and not installed over the public right-of-way.
- (E) A general sign erector may erect and service all graphics allowed by this Graphics Code.



List your present employment, then follow with any previous employment that applies. Only the employment listed will be considered in determining eligibility of the applicant (attach additional sheets and/or resume if necessary):

NOTE: Please attach a complete list of work experiences directly pertaining to the fabrication and erection of signs, along with any completed training and/or education to be considered by the Board of Review for the purpose of determining that the applicant meets the experience requirements of the Graphics Code (See C.C. 3381, Qualifications of Applicant). The applicant should describe types, size, and locations of signs, and the specific tasks that he/she has performed on those signs. Documenting the listed projects with photographs or illustrations is encouraged.

Check here if additional sheets are attached

FROM (MO/DAY/YR)	TITLE OF YOUR PRESENT POSITION	EMPLOYER/ORGANIZATION	BUSINESS P	HONE				
TO (MO/DAY/YR)	MAILING ADDRESS	~ 						
NAME AND TITLE OF IMMEDIATE SUPERVISOR		ARE YOU WORKING FOR THIS EMPLOYER NOW?			NO			
		IF YES, MAY WE CONTACT THIS EMPL	OYER?	YES	NO			
DESCRIPTION OF DUTIES/INSTALLATION EXPERIENCE								

FROM (MO/DAY/YR)	TITLE OF YOUR POSITION	EMPLOYER/ORGANIZATION	EMPLOYER/ORGANIZATION BUSINESS PHONE		
TO (MO/DAY/YR)	MAILING ADDRESS	I			
NAME AND TITLE OF IMMEDIATE SUPERVISOR		ARE YOU WORKING FOR THIS EMPLOYER NOW? YES			NO
		IF YES, MAY WE CONTACT THIS EM	IPLOYER?	YES	NO
DESCRIPTION OF DUTIE	ES/INSTALLATION EXPERIENCE				
FROM (MO/DAY/YR)	TITLE OF YOUR POSITION	EMPLOYER/ORGANIZATION	EMPLOYER/ORGANIZATION BUSINESS PHONE		
TO (MO/DAY/YR)	MAILING ADDRESS	I			
NAME AND TITLE OF IMMEDIATE SUPERVISOR		ARE YOU WORKING FOR THIS EMP	ARE YOU WORKING FOR THIS EMPLOYER NOW?		
		IF YES, MAY WE CONTACT THIS EM	IPLOYER?	YES	NO
DESCRIPTION OF DUTIE	ES/INSTALLATION EXPERIENCE	·			

STATEMENT BY APPLICANT

I hereby certify that, to the best of my knowledge and belief, all statements made herein or attached are complete and accurate. I understand that any false statements later disclosed may cause loss of my right of licensure, and may subject me to prosecution under Ohio Revised Code Section 2921.13.

Signature of Applicant (sign in presence of notary	or Building	& Zoning Services Offici	al)	e Name		Date
Sworn to before me and	l signed in	my presence this	day of		in the year	
Notary Seal Here						
S	Signature of	f Notary Public or Bu	lding & Zoning Servic	es Official	My Commiss	sion Expires
OFFICIAL USE ONL Board Action for Certifi]Approved 🗌 Disa	pproved Tabled	Rejecte	ed for Eligibility	☐ Void Due to Time Limit
Board Member Initials:	YES NO	I	_11	_	 	
Signature of Board Chai	rman:				Review Date	·
By (Secretary):					Date:	