



## APPLICATION FOR SIGN ERECTOR'S LICENSE

1. Applicant must be at least twenty-one (21) years of age, a United States citizen, and have a minimum of three (3) years practical experience with a recognized, reputable sign company.
2. Application fee is \$100 and is required at the time application is submitted. Check should be made payable to "City of Fairfield."
3. Certificate of insurance naming Fairfield Building Division as certificate holder, with minimum limits of liability coverage as follows: \$250,000/\$500,000 bodily injury liability and \$250,000 property damage liability. The certificate of insurance must be submitted at the same time application is submitted.
4. Please complete application in its entirety. Applications that are not fully completed will not be accepted. Questions regarding the procedure for filing an application can be answered by the Building Division at 867-5318. Please submit your completed application, application fee, and certification of insurance to the following address:

CITY OF FAIRFIELD  
BUILDING & ZONING DIVISION  
5350 PLEASANT AVENUE  
FAIRFIELD, OH 45014

Your application will be processed by the building division and once approved, will be forwarded to the civil service clerk for scheduling of the examination.

5. You will be notified by mail of the date and time you are scheduled to take the exam. The exams are given as needed Tuesdays and Wednesdays. If you have any questions pertaining to the examination and/or scheduling, please contact, civil service clerk, at (513)896-8145. The examination will be graded by the civil service clerk and if you receive a passing score (70%), a notice will be given to the Building Division for issuance of the license. If you fail to receive a passing grade, you will not have the application fee returned, but will be entitled to 2 re-examinations within 1 year following the first examination. The re-examination cannot be taken more than once each calendar quarters. If you fail to pass the re-examination within 1 year, the application fee will be forfeited to the City of Fairfield.
6. If you successfully pass the examination, the license will be mailed to you unless other requested.
7. The license expires December 31<sup>st</sup> of each calendar year. The renewal fee is \$35.00. A double fee will be charged for each year a license is not renewed by the expiration date. Any questions pertaining to license renewals should be directed to Building Division, 867-5318.

CITY OF FAIRFIELD BUILDING & ZONING DIVISION  
5350 Pleasant Avenue  
Fairfield, Ohio 45014  
(513) 867-5318

## SIGN ERECTOR APPLICATION

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ALL APPLICANTS MUST MEET AND COMPLY WITH THE REQUIREMENTS LISTED ON PAGE 1.

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1.) ARE YOU A U.S. CITIZEN? [ ] YES [ ] NO  
2.) ARE YOU AT LEAST 21 YEARS OLD? [ ] YES [ ] NO

### APPLICATION INFORMATION

[PLEASE PRINT]

APPLICANT'S NAME \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

COMPANY ADDRESS \_\_\_\_\_

PHONE No. (\_\_\_\_) \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

PHONE No. (\_\_\_\_) \_\_\_\_\_

EMAIL ADDRESS (REQUIRED) \_\_\_\_\_

### THE FOLLOWING PEOPLE ARE AUTHORIZED TO PICK UP PERMITS IN MY NAME:

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**NOTE: Any correction memos that are issued by the City of Fairfield can ONLY be signed by the Registered Ohio Licensed Contractor. A MAXIMUM of six authorized agents will be allowed per contractor.**

**REFERENCES** PLEASE FILL IN THE NAMES OF 3 RESPONSIBLE PERSONS (NOT RELATIVES) KNOWING YOU FOR 1 YEAR OR MORE AND WHO ARE IN A POSITION TO VOUCH FOR YOUR CHARACTER, ABILITY, AND EXPERIENCE.

NAME			
COMPANY NAME			
ADDRESS			
CITY/STATE/ZIP			
TELEPHONE			

## EMPLOYMENT RECORD

GIVE NAMES, ADDRESSES, AND PHONE NUMBERS OF YOUR PRESENT EMPLOYER AND YOUR FORMER EMPLOYER (S), LISTING TIME SERVED WITH EACH AND EXPERIENCE RECEIVED OR POSITION HELD. IF ADDITIONAL SPACE IS REQUIRED, PLEASE ATTACH ANOTHER PAGE.

I ATTEST TO THE FACT THAT THE INFORMATION I HAVE PROVIDED ON THIS SHEET IS TRUE TO THE BEST OF MY KNOWLEDGE AND THAT MY MISREPRESENTATION IS SUFFICIENT CAUSE FOR THE ANNULMENT OF ANY LICENSE ISSUED BASED UPON THE FACTS PRESENTED ON THIS APPLICATION.

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

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

## **BUILDING DIVISION ONLY**

APPLICATION APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

TEST DATE: GRADE RECEIVED: %

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CIVIL SERVICE CLERK USE ONLY

**CML SERVICE CLERK USE ONLY**

I ACKNOWLEDGE RECEIPT OF A COPY OF CHAPTER 1187 OF THE FAIRFIELD CODIFIED ORDINANCES AND CHAPTER 31 OF THE OHIO BUILDING CODE.

**APPLICANT'S SIGNATURE**

DATE