



**DUANE R. FISHPAW**  
MAYOR & DIRECTOR OF PUBLIC SERVICE AND SAFETY

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## Temporary Sign Application

Application Date: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Contact Person – Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Sign Requested  
(e.g., No Parking) \_\_\_\_\_

Date/Time Requested for  
Installation \_\_\_\_\_

Date/Time Requested for  
Removal \_\_\_\_\_

Requested Location(s) \_\_\_\_\_

Map Attached?  \_\_\_\_\_

Helpful Info:

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**To be completed and approved by the Street Department:**

Approved Date/Time of Installation: \_\_\_\_\_ Approved Number of Signs: \_\_\_\_\_

Approved Date/Time of Removal: \_\_\_\_\_ Approved Locations:

\_\_\_\_\_

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\_\_\_\_\_  
*Dave Marcelli, Chief of Police* (date)

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\_\_\_\_\_  
*Jerry Mack, City Services Division* (date)

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\_\_\_\_\_  
*Rick Anderson, Fire Chief* (date)

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\_\_\_\_\_  
*Duane R. Fishpaw, Mayor* (date)

Upon approval of this form, a copy will be sent to the Contact Person, the Ashland Street Department, Ashland Police Dept, and Ashland Fire Department.