

# SYCAMORE TOWNSHIP FIRE DEPARTMENT

## HOUSE NUMBERS

### ORDER FORM

**ADDRESS SIGN CUSTOMER MUST UNDERSTAND THE FOLOWING INFORMATION:**

- 1 The address sign will be put in your yard in a location determined by the fire department. This location will be the most visible, and to identify your individual house and or driveway.
- 2 If the address sign customer does not want the sign in the location determined by the fire department he/she reserves the right to have the address sign only delivered, and not installed.
- 3 For the address signs with posts; the utility companies will be notified in order to have the underground utilities marked. This will assist the Fire Department in determining the best location for the address sign. The utility companies will be notified by the Fire Department.
- 4 The fire department will not provide services for the maintenance and upkeep of the signs once they are installed or delivered.
- 5 Sycamore Township assumes no liability for the address sign once it is installed.
- 6 Please allow 4-6 weeks for installation of signs.

Date Order Taken      -      -      .






Name \_\_\_\_\_.

Address \_\_\_\_\_.

Phone Number      -      -      .

Person taking the order. \_\_\_\_\_

**. Check the one to be ordered:**

<div style="text-align: center;">  </div> <div style="text-align: center;"> <b><u>Sign And Post \$ 14.00</u></b> </div> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">   <b><u>-Sign and Post</u></b>              Sign vertical      <input type="radio"/> </div> <div style="text-align: center;">               Sign Horizontal      <input type="radio"/> </div> </div>	<div style="text-align: center;">   <b><u>-Sign Only</u></b>              Numbers Vertical      <input type="radio"/> </div> <div style="text-align: center;">               Numbers Horizontal      <input type="radio"/> </div>
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+++++ Ohio Utilities Protection Service 1-800-362-2764 , Job ID # \_\_\_\_\_

Date called \_\_\_\_\_

+++++

☐ BILLED      ☐ PAID      ☐ PRE-PAID

Amount \$ \_\_\_\_\_.

☐ PICKED UP      ☐ INSTALLED      ☐ DELIVERED

Name \_\_\_\_\_.

Date Received      -      -      .

Notes: \_\_\_\_\_.

\_\_\_\_\_.