

**APPLICATION**  
**FOR REQUEST OF SPECIFIC CUPOLA LIGHTING**

Name of Responsible Organization or Name(s) of Citizens Requesting Use: \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Email \_\_\_\_\_

Authorized Agent of Responsible Organization \_\_\_\_\_

Title \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Cupola Lighting Color Request (be specific) \_\_\_\_\_

\_\_\_\_\_

Proposed Reason of Display (be specific) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Proposed Use \_\_\_\_\_ Time (Start) \_\_\_\_\_ (Stop) \_\_\_\_\_

Other Important Facts \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contact Person for Request for Specific Color of Cupola Lighting is:

**Administrator**  
**Seneca County Commissioners**  
**111 Madison Street**  
**Tiffin, Ohio 44883**  
**419-447-4550**  
[swilson@senecacountyohio.gov](mailto:swilson@senecacountyohio.gov)



Request is GRANTED: \_\_\_\_\_



Request is DENIED for the following reasons: \_\_\_\_\_

\_\_\_\_\_  
County Administrator

\_\_\_\_\_  
Date