

# SIGN PERMIT APPLICATION

## SIGN LOCATION INFORMATION:

911 Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip: \_\_\_\_\_  
Subdivision: \_\_\_\_\_  
Section: \_\_\_\_\_ Lot #: \_\_\_\_\_

## SIGN CONTRACTOR:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email: \_\_\_\_\_

## PERMANENT SIGN

Placement:  Wall  Pylon  Pole  Awning  Monument  
 Post  Other \_\_\_\_\_  
Lighting:  Incandescent  Florescent  LED  
 Neon  Other \_\_\_\_\_  
Existing Signs  Ground  Wall  Pole  Roof  
 Projecting  Other \_\_\_\_\_  
Height: \_\_\_\_\_ Above Grade  
Length of Store Front: \_\_\_\_\_  
Dimensions: Height: \_\_\_\_\_ Width: \_\_\_\_\_  
Total Square Feet \_\_\_\_\_  
Estimated Cost: \_\_\_\_\_

## TEMPORARY SIGN

Placement:  Wall  Post  Banner  
 Other \_\_\_\_\_  
Height: \_\_\_\_\_ Above Grade  
Dimensions: Height: \_\_\_\_\_ Width: \_\_\_\_\_  
Total Square Feet \_\_\_\_\_

## DATES SIGNS ARE TO BE DISPLAYED:

From \_\_\_\_\_ To: \_\_\_\_\_

I CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS COMPLETE  
AND ACCURATE UNDER PENALTY OF PERJURY

SIGNATURE: \_\_\_\_\_  
PRINTED NAME: \_\_\_\_\_

## Department Use Only:

ILP # (\$50.00)		
Building Permit #		
Permit Fee		
Receipt #		
Check #		
Date		
Issued By:		
Section	Twp	Range
Zoning		
Floodplain		
Parcel ID #		

## PROPERTY OWNERS:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email: \_\_\_\_\_

## APPLICANT:

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone Number: \_\_\_\_\_

I ACKNOWLEDGE THAT REQUESTED INSPECTIONS MUST BE  
CALLED FOR 24 HOURS PRIOR AND THAT I HAVE SUBMITTED  
PROPER DRAWINGS AND LAYOUT OF STRUCTURE