

9500 Belmont Avenue · Franklin Park, Illinois 60131 (847) 671-8245, FAX # (847) 671-8790

SIGN PERMIT APPLICATION

| DATE: | Plat of Surve | _ Plat of Survey required (two copies) ☐ YES PERMIT NUMBER: 24-SP- | | | | |
|--|---|--|---|--|--|--|
| Check Box: | ☐ Illuminated Sign ☐ Non Illuminated Sign | | | | | |
| Check Box: | ☐Sign New | □Sign Repair | ☐Sign Temporary | ☐ Awning or Marquee | | |
| Business Name | e: | | | | | |
| | | | | | | |
| | | | | Phone #: | | |
| Contractor | | | | | | |
| | | | | | | |
| | | | | Phone # | | |
| Manufacturer o | f Sign | | | | | |
| | | | | | | |
| | NEW SIGN | | Туре | | | |
| Size of Sign (sq.ft) | | | Size | | | |
| Wording & Size of Letters (drawing attached) | | | Location | | | |
| Height of Sign including MastSign Material | | | | Owner of Sign | | |
| | | | | | | |
| | | | 7 101 011 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | |
| | | | | | | |
| | | | | ELECTRIC for SIGN | | |
| | | | A separate Ele any electrical v | ctrical Permit is required for work performed. | | |
| | APPLICANT SIGNAT | URE | | | | |
| | TEMPORARY S | SIGN * FOR O | FFICE USE ONLY * | | | |
| ZONING APP | ROVAL & COMM | IENTS | | DATE & TIME CALLED/PICKUP: | | |
| | | THEVL | | | | |
| | | | | e: | | |
| | | | Total Fe | ees: | | |
| | | | 1. 1892 | INITIAL O. PUIU PINO SIZZOZO | | |
| | | | | INITIALS – BUILDING DIRECTOR | | |