

SIGN PERMIT APPLICATION



Do Not Write In This Space

Permit No. _____
 Date Issued _____
 Date Expires _____
 Permit Fee \$ _____

Date of Application: _____ Application Is Hereby Made For A Permit To: Alter Erect

<i>Name of Business</i>	<i>Business Address</i>	<i>Name of Shopping Center</i>
<i>Applicant Name</i>	<i>Applicant Address</i>	<i>Applicant Telephone & E-Mail</i>
<i>Sign Contractor</i>	<i>Contractor Address</i>	<i>Contractor Telephone & E-Mail</i>
<i>Electrical Contractor</i>	<i>Contractor Address</i>	<i>Contractor Telephone & E-Mail</i>

Is the property: Residential Commercial Industrial

Mark an "X" in all squares below to indicate class of work to be done:

- | | | |
|---|---|---|
| <input type="checkbox"/> Wall Sign | <input type="checkbox"/> Real Estate Sign | <input type="checkbox"/> Display Board / Changing Sign
(C-Zoned properties Only) |
| <input type="checkbox"/> Monument Sign | <input type="checkbox"/> Menu Board | <input type="checkbox"/> Reface Only |
| <input type="checkbox"/> Free Standing Sign/Shopping Center | <input type="checkbox"/> Canopy | <input type="checkbox"/> Illuminated |
| <input type="checkbox"/> Identification Sign | <input type="checkbox"/> Under Canopy | <input type="checkbox"/> Non-illuminated |
| <input type="checkbox"/> Directional Sign | <input type="checkbox"/> Window Sign | <input type="checkbox"/> Other _____ |

Sign Details:

Horizontal Dimension _____	Vertical Dimension _____
Projection from Wall _____	Length of Wall Being Attached to _____
Total Area in Sq. Ft. _____	Value of Sign \$ _____

Description/Comments: _____

APPLICATIONS MUST BE ACCOMPANIED BY: Plat of Survey Owner's Letter (Tenants Only) Architectural Sign Plan

UNDER PENALTIES OF INTENTIONAL MISREPRESENTATION AND/OR PERJURY. I declare that I have examined and/or made this application and it is true and correct to the best of my knowledge and belief, I agree to construct said improvement in compliance with all provisions of the Building and Zoning Ordinances of the Village of Glendale Heights and all amendments thereto.

Applicant Name _____ Applicant Signature _____ Date _____

Village of Glendale Heights • Community Development Department
 300 Civic Center Plaza • Glendale Heights, IL 60139
 Direct (630) 260-6030 • Fax (630) 260-1317

DATE APPROVED: _____
 ASST. ZONING/PLANNING ADMIN: _____
 DIRECTOR OF COMMUNITY DEVELOPMENT: _____