



Sign Permit Application

Community Development Department

5550 East Avenue – Countryside, Illinois 60525

Phone: (708) 354-1860

www.countryside-il.org

Fax: (708) 354-9029

PLEASE NOTE: SUBMIT ALL REQUIRED DOCUMENTS TO THE BUILDING DEPARTMENT. INCOMPLETE SUBMITTALS WILL BE SENT BACK TO THE APPLICANT.

Date: _____ Commercial Industrial Multi-Family Condominium

Tax Bill w/ application - Property Identification Number _____

Business Name: _____ Property Owner Name: _____

Contact #: _____ Contact Email: _____

Sign Address: _____ New Business: YES/NO (circle one)

DESCRIPTION OF SIGN

NOTE - **ONE PERMIT APPLICATION PER SIGN**

Application is hereby made to: Erect Alter Relocate Construction Cost: \$ _____

Are any existing signs at the location to remain? No Yes Total sq. ft of Signs, including proposed _____

Property/Building Information: Lot Width _____ feet Linear footage of building: _____ feet

Freestanding Signs: (include footing specifications, including size, depth and reinforcement of footings)

Sign Size: width _____ feet Height _____ feet Total sq.ft _____

Height from grade to top of sign _____ feet Distance from street right-of-way _____ feet

Setback from nearest property line _____ feet Open Space between baseline of sign and ground _____ feet

Illumination: None Internal External

Monument Signs: (include footing specifications, including size, depth and reinforcement of footings)

Sign Size: width _____ feet Height _____ feet Total sq.ft _____

Height from grade to top of sign _____ feet Distance from street right-of-way _____ feet

Setback from nearest property line _____ feet

Illumination: None Internal External

Wall Signs:

Sign Size: width _____ Height _____ feet Total sq. ft _____ Projection from the wall _____ In.

Building Elevation Front Rear Side Illumination: None Internal External

Additional Information:

INTERNAL USE ONLY:

Permit # _____ Other Cost _____ Engineering Cost _____ Permit Cost: _____
Bond Amt / number _____ Other Cost: _____ Total Amount \$ _____

RECEIPT HEREBY ACKNOWLEDGED AND PERMIT HEREBY AUTHORIZED

Building/Electrical Approved By _____ Date: _____

Zoning Approved By _____ Date: _____

Engineering Approval Required

Variance: No/ Yes Ordinance# _____ Special Use: No/Yes Ordinance# _____

Contractor Information

LIC. #	\$50				BUSINESS NAME	PHONE
#	\$25	BOND	INS	CONTRACTOR	ADDRESS / CITY / ZIP	
(OFFICE USE ONLY↓)						
CONTRACTORS THAT REQUIRE LICENSE FEE – BOND – INSURANCE						
				ASPHALT / CONCRETE		
				EXCAVATOR		
				SIGN CONTRACTOR		
(OFFICE USE ONLY↓)						
ELECTRICIANS TESTED AND LICENSED BY AN ILLINOIS MUNICIPALITY						
				ELECTRICIAN		

The following items must be submitted with this application:

- One (1) color copy of the sign plan, including all dimensions and the square footage of the sign
- One (1) color rendering of the sign as it is proposed on the building or on the property
- An Aerial photograph, current survey, or site plan with the sign location marked
- A copy of written consent from the owner of the building or land of which the sign is to be erected
- Complete listing of existing signs attached including type and size area

Statement of the Applicant:

In consideration of the issuance of the permit herein applied for, I agree that the erection, alteration or relocation of said sign and in the use of said sign; I will conform to the regulations set forth in the City of Countryside Zoning Ordinance and City of Countryside Building Ordinance. I also agree that all work performed under said permit will be in accordance with the description which accompanies this application. I hereby certify that I have the legal authority to make this application, and all information provided in this application and any other information provided by me in support of this application, is true, complete and accurate to the best of my knowledge. I have read, do understand, and shall comply with all applicable terms and conditions required for this application. I also understand that I am responsible for all plan review and engineering fees.

Applicant Signature: _____ **Date** _____

Printed Name: _____ **Company Represented:** _____

Phone: _____ **Fax:** _____ **E-mail:** _____