



# APPLICATION FOR SIGN PERMIT

## VILLAGE OF ANTIOCH

Community Development Department  
874 Main Street, Antioch, IL 60002

Phone: (847) 395-1000

Fax: (847) 395-1920

Location Address			Business Name		
Email Address				Project Cost:	
Name		Street Address, City, State Zip		Phone / Fax / Mobile	
Property Owner				Phone:	
				Email:	
				Cell:	
Tenant				Phone:	
				Email:	
				Cell:	
Sign Contractor				Phone:	
				Email:	
				Cell:	
Electrical Contractor				Phone:	
				Email:	
				Cell:	
Existing Sign Information			Proposed Sign Information		
Type		Size	Dimensions	Description	
1			Lot Size:	Permanent Sign	Lighting
2			Total S.F. of Floor Area:	___ Wall	___ Internal
				___ Monument	___ External
3			Sign Size:	___ Window	___ Gooseneck
				___ Awning	
Additional Information					Temporary Signs
					___ Banners
					___ Balloon / Pennant
					___ Other
All information provided herein is true and correct and all provisions of the ordinances of the Village of Antioch shall be complied with. I hereby certify that the proposed use is authorized by the owner of record and that I have been authorized by the owner to submit this application as his/her agent.					
Print Name of Applicant		___ Owner	Received		
		___ Contractor			
		___ Tenant			
		___ Other			
Signature of Applicant		Date:			
<b>COMPLETE A PERMIT APPLICATION FOR EACH SIGN</b>					
<b>FOR OFFICE USE ONLY:</b>	Permit	Fee	Zoning/Building Approval	Date Approved	