



**City of Sycamore**

**Building Department**

541 DeKalb Ave.

Sycamore, IL 60178

T#: 815-895-4434

F#: 815-895-7572

[www.cityofsycamore.com](http://www.cityofsycamore.com)

**For Office Use Only**

Permit No.: \_\_\_\_\_

Zoning Dist.: \_\_\_\_\_

Date: \_\_\_\_\_

Fee: \$ \_\_\_\_\_

**SIGN PERMIT APPLICATION**

(Print Clearly)

**SIGNS MUST BE DISPLAYED AT BUSINESS ADDRESS – OFFSITE SIGNS ARE PROHIBITED**

(UNLESS APPROVED BY CITY MANAGER)

*This application **MUST BE LEGIBLE, COMPLETE and ACCURATE**. Failure to do so will result in the rejection of the application and non-issuance of the City of Sycamore's permit*

**APPLICANT INFORMATION**

|           |  |      |  |                |  |
|-----------|--|------|--|----------------|--|
| Applicant |  |      |  |                |  |
| Address   |  |      |  | City/State/Zip |  |
| Day Phone |  | Cell |  | Fax            |  |

**PROPERTY INFORMATION**

|                                      |  |  |           |  |
|--------------------------------------|--|--|-----------|--|
| Name of Business                     |  |  | Day Phone |  |
| Address where sign will be displayed |  |  |           |  |

Type of Sign:      Wall       Pole       Ground       Other  \_\_\_\_\_

|                                 |  |                |    |
|---------------------------------|--|----------------|----|
| Total Square Footage (per side) |  | Estimated Cost | \$ |
|---------------------------------|--|----------------|----|

|                       |  |             |  |
|-----------------------|--|-------------|--|
| Sign Contractor       |  |             |  |
| Electrical Contractor |  | Syc. Lic. # |  |

**BUSINESS OWNER INFORMATION**

|           |  |      |  |                |  |
|-----------|--|------|--|----------------|--|
| Name      |  |      |  |                |  |
| Address   |  |      |  | City/State/Zip |  |
| Day Phone |  | Cell |  | Fax            |  |

**ORIGINAL SIGNATURES REQUIRED – FACSIMILES OR COPIES WILL NOT BE ACCEPTED**

I, the applicant, certify as owner or authorized agent of this project, do hereby certify that the proposed work has been authorized by the owner of record and that I have been authorized to complete this application on the owner(s) behalf and that the information contained in this application is true and correct including all dimensions and specifications shown on Drawings "A" and "B", and if a permit is issued to me, I agree to do or allow to be done only such work as herewith applied for and will conform to all of the codes, laws and ordinances of the City of Sycamore. I am familiar with the applicable ordinances and the provisions thereof and in signing this application do willingly become responsible for all work accomplished under the permit by all contractors, tradesmen and workmen and shall schedule all necessary inspections as they become due.

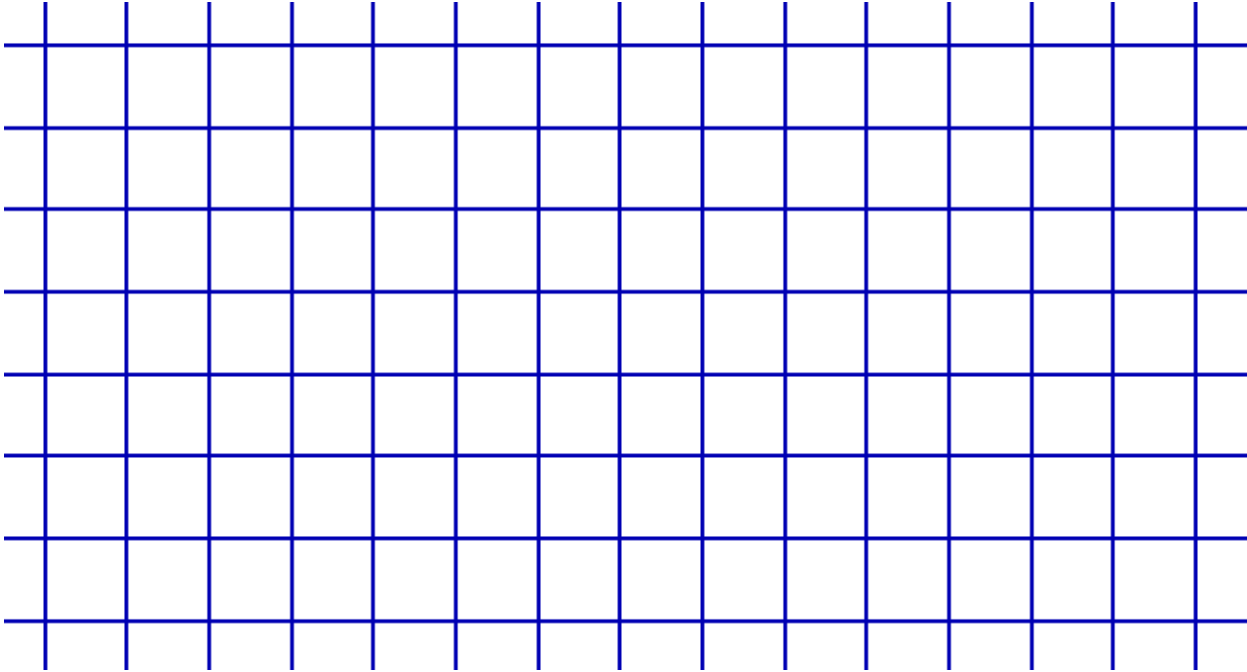
**DATE:** \_\_\_\_\_

**PRINT NAME:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**THE FOLLOWING SHALL BE SHOWN ON DRAWING “A”:**

1. North direction arrow.
2. Dimensions of the lot.
3. Adjacent street(s)
4. All easements on said lot.
5. Exact location of all buildings on the lot (show distance to property lines).
6. Proposed sign location (show distances to buildings and property lines).



**THE FOLLOWING SHALL BE SHOWN ON DRAWING “B”:**

1. The sign copy.
2. The sign dimensions (including heights).

