COUNTY OF PEORIA



DEPARTMENT OF PLANNING & ZONING

PEORIA COUNTY COURTHOUSE • ROOM 301 324 Main Street • Peoria Illinois 61602-1313

Telephone (309) 672-6915 • Fax (309) 672-6075 • TDD (800)526-0844

WEBSITE: https://www.peoriacounty.gov • EMAIL: buildingpermits@peoriacounty.org

SIGN PERMIT APPLICATION

To the applicant: Please complete this form in its entirety. If you do not have all of the necessary information, we will be unable to accept this application. Staff has up to seven (7) calendar days to review, and either approve or deny the request. A complete permit application will expedite the review and permitting process. There is a \$110.00 permit fee. THANK YOU

PROPERTY OWNER NAME & ADDRESS			CONTRACTOR NAME & ADDRESS (if other than owner)		
PHONE:EMAIL:			PHONE:EMAIL:		
★Please note persor	n to contact when permit is read	dy.★			
CONSTRUCTI	ON SITE PARCEL ID	NUMBER:			
CONSTRUCTI ★An address must b ESTIMATED	ON SITE 911 ADDRES be assigned to the parcel by the COST OF CONSTRU	S: County Clerk's C UCTION: \$			
• Illumination	Method • Lightin faces • Propos		 Sign Location 	•	QUIRED.★ Direction of Sign Faces Ground of Building Attachment Method
SIGN TYPE:	☐ Business Sign		nily Building ID Sign		ion ID Sign
SIGN STYLE:	☐ Construction Sign☐ Free Standing Sign☐	_	lential Sign (attached to Building) or the sign on site plar	★Include to	tal area of wall to be
SIGN TIME:	☐ Permanent Sign	☐ Temporary	Sign		
SIGN FACE DI Width Length	ft	in in	TOTAL SIGN FACE	AREA: sq. ft.	SIGN HEIGHT: ft in
★Please building to be ere ★Permits sh permit applica upon finding	include written conse or structure to which t cted, when the owner, t hall be issued for the li tion. However, any p Othat the sign violates made false represent	he sign is to be the sign fe of the sign ermit may be any provision ations in secu	be attached and/or the hager is not the application, or any shorter perion revoked at any time on of Section 20-7.4.	rol, or the reland on what for the state od as state oe by the Zo Fences, as at. No fee w	hich the sign is ign permit. * I on the approved ning Administrator amended; or @that hich the permittee
	I CERTIFY THAT THE	E ABOVE INF	ORMATION IS TRUE	AND CORR	ECT.
	APPLICANT'S SIG	NATURE		D	PATE
		FOR OFFIC	CE USE ONLY		
FILED BY:			DATE:		

DATE:

ZONING:

APPROVED BY: