



**VILLAGE OF ALGONQUIN**  
 COMMUNITY DEVELOPMENT  
 2200 HARNISH DRIVE, ALGONQUIN, IL 60102  
 847-658-2700, OPTION 3  
**SIGN PERMIT APPLICATION**

**\*ONLY 1 SIGN PER PERMIT\***

PERMIT NUMBER: \_\_\_\_\_

ADDRESS OF SIGN INSTALLATION: \_\_\_\_\_

PERMIT APPLICANT IS:    **PROPERTY OWNER**            **TENANT**            **SIGN COMPANY**

APPLICANT: \_\_\_\_\_ PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

APPLICANT ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE/ZIP: \_\_\_\_\_

| NEW SIGN                    | REPAIR/REPLACE SIGN  | RELOCATE EXISTING SIGN |
|-----------------------------|--|------------------------|
| <b>MONUMENT/GROUND SIGN</b> | <b>WALL SIGN</b>   | <b>MENU BOARD SIGN</b> |
| <b>FLAG POLE</b>            | <b>TEMPORARY BANNER</b>  | <b>CANOPY/MARQUEE</b>  |
| <b>AWNING</b>               | <b>ENLARGED REAL ESTATE SIGN</b>   | <b>OTHER</b>           |
| <b>SINGLE-FACE SIGN</b>     | <b>DOUBLE-FACE SIGN</b>  |                        |
| <b>NON-ILLUMINATED</b>      | <b>ILLUMINATED – ELECTRICAL CONTRACTOR INFORMATION TO BE COMPLETED</b><br>(Copy of Current Electrical License) |                        |

ELECTRICAL CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE/ZIP: \_\_\_\_\_

**SIGN COMPANY NAME:** \_\_\_\_\_ PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE/ZIP: \_\_\_\_\_

SIGN DIMENSIONS:    HEIGHT: \_\_\_\_\_    WIDTH: \_\_\_\_\_    TOTAL SQ.FT: \_\_\_\_\_  
 SIGN DESCRIPTION: \_\_\_\_\_

**ESTIMATED COST OF SIGN: \$ \_\_\_\_\_**

- Details needed for all sign types.
- Plat of Survey with location of sign and distance from lot lines needed for: Monument Sign, Menu Board Sign, Flag Pole and Real Estate Sign.
- Landscape Plan needed for: Monument Sign, Flag Pole (2 sq.ft. of landscaping required for every 1 sq.ft. of sign face).
- Rendering/Elevation with dimensions needed for: Wall Signs, Temporary Banners, Canopy/Marquee and awning.

The undersigned certifies that the statements in this application are true and correct and that all work done under the proposed permit will conform to the requirements of the Village of Algonquin Sign Ordinance and all other Village Ordinances.

SIGN ERECTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**PROPERTY OWNER'S SIGNATURE OF PERMISSION:** \_\_\_\_\_

No error or omission in either plans or application, whether said plans or application has been approved by the Community Development or not, shall permit or relieve the applicant from constructing the work in any other manner than that provided for in all the ordinances of the Village of Algonquin relating thereto. The applicant having prepared and read this application and fully understanding the intent thereof declares that the statements made are true to the best of his ability, knowledge and belief. Construction of sign must be completed within 90 days following the permit issue date, otherwise permit shall become null and void. No refund of permit fees shall be issued.

**INSPECTIONS ARE REQUIRED FOR EVERY PERMIT. CALL 847-658-2700 X 3-24 HRS PRIOR TO INSPECTION.**