VILLAGE OF RIVERDALE
157 W. 144TH STREET
RIVERDALE, IL 60827
PH 708/841-2200 FAX 708/841-7587

SIGN LICENSE

FOR OFFICE USE:

ZONING DEPT: DATE APPROVED _____ DATE DENIED _____ INITIALS _____

(PRINT OR TYPE ONLY)

EACH PERSON SEEKING SUCH LICENSE MUST HAVE OBTAINED A SIGN PERMIT FROM BUILDING AND ZONING WHEN SIGN WAS CONSTRUCTED.

EACH PERSON SEEKING SUCH LICENSE MUST COMPLETE ALL OF THE APPROPRIATE INFORMATION BELOW AND RETURN WITH THE PROPER APPLICATION FEE. A SEPARATE APPLICATION MUST BE SUBMITTED FOR EACH SIGN.

(PRINT OR TYPE ONLY)

BUSINESS NAME _____

ADDRESS _____
STREET CITY STATE ZIP

PHONE # _____ FAX # _____ IBT # _____

OWNER NAME _____ PHONE # _____

ADDRESS _____
STREET CITY STATE ZIP

CONTACT PERSON _____ PHONE # _____ CELL # _____

EXACT LOCATION OF SIGN _____

ATTACHED TO BUILDING ( ) YES ( ) NO

IF YES, HOW IS IT ATTACHED? ( ) OVERHANGING ( ) FLUSH WITH BUILDING

LIGHTED ( ) YES ( ) NO SIZE _____

I UNDERSTAND THAT APPROVAL FOR THIS LICENSE IS CONTINGENT UPON APPROVAL BY THE BUILDING AND OR ELECTRICAL INSPECTOR. THE BUILDING AND ZONING DEPARTMENT WILL MAKE THE FINAL DETERMINATION.

PRINT NAME _____ DATE _____

SIGNATURE _____

*****INCOMPLETE APPLICATIONS WILL BE RETURNED TO APPLICANT*****