



APPLICATION FOR SIGN PERMIT

VILLAGE OF CAHOKIA
CODE ENFORCEMENT DEPARTMENT
201 W 4TH STREET
CAHOKIA, IL. 62206

OFFICE: 618-337-9517

FAX: 618-337-9518

NAME OF APPLICANT

NAME:	
Address:	
Phone:	Cell phone:
LOCATION OF SIGN:	OFFICE:

CONTRACTOR INFORMATION:

NAME:
ADDRESS:
PHONE

ARCHITECT INFORMATION

NAME:	Phone:
ADDRESS:	

SIGN INFORMATION

TYPE OF SIGN:	
SQ FT OF SIGN:	ZONE DISTRICT:
SIZE OF SIGN:	FEE PAID:
WILL SIGN BE LIT:	
IS SIGN LOCATED IN A INTERSTATE INTERCHANGE ZONE:	
PARCEL NUMBER:	
SIGNATURE OF OWNER,AGENT, OR CONTRACTOR:	DATE:
X _____	
THE APPLICANT HEREBY AGREES THAT THE APPROAVL OF PLANS, OR THE ISSUING OF A PERMIT, PROCURED BY MISREPRESENTATION OF FACTS OR CONDITIONS, MISSTATEMENTS IN APPLICATION, OR THROUGH IMPROPER ACTION OF ANY OFFICER OR EMPLOYEE OF THE VILLAGE OF CAHOKIA, ILLINOIS DOES NOT LEGALIZE AN ILLEGAL CONSTRUCTION, ARRANGEMENT, OR CONDITIONS.	
BUILDING ADMINISTRATOR :	DATE:

FEE FOR SIGN IS \$50.00 (BASE). PLUS .25 X PER SQ FT OF SIGN.

PLEASE ATTACH ALL PHOTOS OR OTHER RELATED ITEMS TO THIS APPLICATION.

ADDITIONAL INFORMATION

A large, empty rectangular box with a thin black border, occupying most of the page below the section header. It is intended for providing additional information.