

VILLAGE OF FORSYTH

301 S. Route 51

Forsyth, IL 62535

Phone: (217) 877-9445 / Fax: (217) 877-9863



SIGN PERMIT APPLICATION

APPLICANT:

Business Name: _____

Contact Person: _____

Address: _____ Phone: _____

Sign Erector: _____

Erector Address: _____ Erector Phone: _____

Sign Manufacturer: _____

SIGN TYPE: _____

SIGN DIMENSIONS:

If Wall Sign Provide: Wall Height: _____ Wall Length: _____ Wall Area: _____

If Freestanding Sign Provide: Sign Height: _____

Sign Face Dimensions:

Height: _____ Width: _____ Area: _____ Number of faces: _____

Setback from property line: _____

Sign Location Description on the Property (provide sketch on following page):

*** Please attach a sketch of the sign.** If the sign is an irregular shape (other than a rectangle), please include a scaled or dimensioned drawing and all area calculations. You may attach blueprints or like materials in lieu of a sketch.

Describe any other signs for this business/building:

I certify that the above information is true and correct to the best of my knowledge. I understand that if the information contained on this application is false, the permit is void, and this application is void if work is not started within 6-months after permit issuance.

Signature of Applicant

Date

Simple Sign Permit (no electrical or structural) Fee: \$10.00

Sign Permit Fee: \$50.00

Make checks payable to: Village of Forsyth

For office use only	
Date approved: _____	Approved by: _____
Permit # _____	Permit Expires: _____
If not Approved, Reason: _____	
Date not Approved: _____	Not Approved by: _____

