

**CITY OF WAUKEGAN**  
BUILDING DEPARTMENT

Temporary Sign Permit

1. Sign Contractor:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

2. Owner of Property

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

3. Address of Property (where sign is to be located)

Business Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

4. Type of Sign: \_\_\_\_\_ Inspection Date: \_\_\_\_\_

If other than a standard type of temporary sign, describe in detail, indicate size, placement, and materials or attach a scale drawing.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Electrical Sign: Yes \_\_\_\_\_ No \_\_\_\_\_

6. Date Permit Issued: \_\_\_\_\_ Date Sign To Be Removed: \_\_\_\_\_

7. Applicant's Signature: The information supplied herein true and accurate.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

8. Approval:

Approved:                      Date: \_\_\_\_\_                      Signature: \_\_\_\_\_

Denied:                         Date: \_\_\_\_\_                      Signature: \_\_\_\_\_

9. Brief statement of reason for denial: \_\_\_\_\_

\_\_\_\_\_