

DATE	INSPECTIONAL SERVICES			PERMIT NUMBER	
DRAWINGS <input type="radio"/>	VILLAGE OF STEGER			ANNUAL FEE	
ATTACHED <input type="radio"/>	SIGN PERMIT APPLICATION				
NAME					
ADDRESS OF SIGN (NUMBER, DIRECTION AND STREET NAME)					
CITY/STATE			PHONE		
TYPE OF BUSINESS			TYPE OF SIGN		<input type="checkbox"/> ADVERTISING <input type="checkbox"/> ILLUMINATED <input type="checkbox"/> BUSINESS <input type="checkbox"/> NON-ILLUMINATED
TYPE OF PERMIT					
<input type="radio"/> NEW SIGN		<input type="radio"/> ADDITIONAL SEGMENT		<input type="radio"/> CHANGE OF FACE	
<input type="radio"/> REHANG		<input type="radio"/> REPAIR		<input type="radio"/> REMODEL	
TYPE OF SUPPORT FOR SIGN					
<input type="radio"/> BEAM		<input type="radio"/> CANOPY		<input type="radio"/> POLE	
<input type="radio"/> BUILDING		<input type="radio"/> GROUND STRUCTURE		<input type="radio"/> ROOF	
TYPE OF SIGN					
<input type="radio"/> FLAT		<input type="radio"/> ROOF		<input type="radio"/> SIGNBOARD	
<input type="radio"/> PROJECTING OVER PUBLIC PROPERTY			<input type="radio"/> PROJECTING OVER PRIVATE PROPERTY		
SIZE OF SIGN			EQUIPMENT EQUIPMENT		
LENGTH		FT.	IN.	NO. OF LAMPS: <input type="checkbox"/> INCANDESCENT <input type="checkbox"/> FLUORESCENT	
				TOTAL WATTAGE: <input type="checkbox"/> NEON <input type="checkbox"/> OTHER	
HEIGHT					
HEIGHT		FT.	IN.	WILL FEEDERS BE INSTALLED BY YOU? <input type="radio"/> YES <input type="radio"/> NO	
AREA					
AREA		SQ. FT.		WILL CONNECTIONS BE MADE TO CUSTOMERS LEAD BY YOU? <input type="radio"/> YES <input type="radio"/> NO	
SIGN WILL READ:			TYPE OF SWITCH		<input type="checkbox"/> KNIFE <input type="checkbox"/> SPECIAL
			LOCATION OF SWITCH		<input type="checkbox"/> OUTSIDE <input type="checkbox"/> INSIDE
SIGN LOCATION:			ADDRESS WHERE SIGN CAN BE SEEN PRIOR TO ERECTION		
The undersigned certify 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 Steger.					
LICENSE #			NAME OF SIGN ERECTOR		
NAME OF ELECTRICAL CONTRACTOR			ADDRESS		
ADDRESS			PHONE NUMBER		
SUPERVISOR SIGNATURE					
OFFICE USE ONLY			<input type="checkbox"/> APPROVED		<input type="checkbox"/> REJECTED
ANNUAL FEE:			SIGN INSPECTORS SIGNATURE		
TOTAL FEE:					

