



CITY OF HIGHWOOD
 17 HIGHWOOD AVE
 HIGHWOOD, IL 60040
 Phone 847.432.1924 / Fax 847.432.0735
 www.cityofhighwood.org

Sign Permit Application

Permit No. _____

Date: _____

I, _____, hereby apply to the Building Department of the City of Highwood, for a permit to erect, alter or repair the sign structure or part thereof hereinafter described and, if granted the permit applied for, I will comply with all requirements of the City Ordinances relating thereto and pay the fees required by said Ordinances.

Property Owner Name: _____

Street Address: _____

Zoning: _____

Type of Sign

- Roof Ground Double Face Single Face Projecting
- Wall Marquee Canopy Awning Banner Window
- Other _____

Type of materials: _____

Appearance Review Commission Approval Date:

_____/_____/_____

Description & Construction Details of Sign

Submit plan or draw sketch below. All structural members and materials must be indicated on plans or sketch.

Type of lighting (if applicable): _____

Electrical contractor: _____ Contractor No.: _____

Signature of Applicant: _____ Building Official: _____

PERMIT FEES	
Permit No.	_____
Issued By:	_____
Permit Fee	_____
Plan Review Fee	_____
Inspection(s) Fee	_____
Administrative Fee	_____
Total Fees	_____
Deposit (if required)	_____