



**DEVELOPMENT SERVICES DEPARTMENT**

14700 RAVINIA AVENUE  
ORLAND PARK, ILLINOIS 60462  
(708) 403-5300  
[www.orlandpark.org](http://www.orlandpark.org)

DATE RECEIVED: \_\_\_\_\_

PERMIT #: \_\_\_\_\_

**APPLICATION FOR TEMPORARY SIGN PERMIT**

**APPLICANT INFORMATION**

Applicant Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Company: \_\_\_\_\_

Email: \_\_\_\_\_

**SITE INFORMATION**

Business/Site Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Business Owner: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**CONTRACTOR INFORMATION**

OFFICE USE ONLY: CL: \_\_\_\_\_ BOND EXP: \_\_\_\_\_

Sign Contractor: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

**SIGN INFORMATION**

**Circumstance:**  Coming Soon  Grand Opening  Temporary/Seasonal Use  Other: \_\_\_\_\_  
 Special Event  Store Closing  Prior to Permanent Sign

**Duration of Display:** Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Total Days: \_\_\_\_\_

**Sign Text:** \_\_\_\_\_

**Sign Materials:** \_\_\_\_\_

**Sign Colors:** \_\_\_\_\_

**Sign Location:**  Wall  Ground

**Estimated Cost:** \_\_\_\_\_

**Sign Type:**  Banner  Inflatable  Dual Post

**Quantity of Signs:** \_\_\_\_\_

**Sign Length:** \_\_\_\_\_ **Sign Height:** \_\_\_\_\_

**Sign Face Area:** \_\_\_\_\_

**Tenant Type:**  Residential  Non-Residential  Vacant Land

**Tenant Frontage (ft):** \_\_\_\_\_

**Submittal requirements:**

- One (1) color copy of the fully-dimensioned Sign Plan.
- An aerial image, Plat of Survey, and/or Site Plan with the proposed sign location(s) clearly marked.
- A copy of written consent from the owner of the building or land.

The Applicant hereby certifies the correctness and completeness of this application and agrees that all signage shall comply with all applicable Village regulations (including Section 6-307 (Signs) of the Land Development Code) and shall be installed in accordance with the approved plans.

Applicant Signature: \_\_\_\_\_

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

OFFICE USE ONLY:  Application Complete  Verify Occupancy  Approval: \_\_\_\_\_ Fee: \_\_\_\_\_