



CITY OF DECATUR ILLINOIS

#1 GARY K. ANDERSON PLAZA DECATUR, ILLINOIS 62523-1196
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APPLICATION – SIDEWALK SIGN PERMIT

Please fill in all requested information.

| | |
|-------------------|--|
| Application Date: | |
|-------------------|--|

| | | | |
|-------------------------|--|----------------|--|
| Legal Name of Business: | | | |
| Doing Business As: | | | |
| Business Address: | | | |
| Owner's Name: | | Owner's Phone: | |
| Owner's Email: | | | |

| | | | |
|----------------|--|----------------|--|
| Store Manager: | | 24-Hour Phone: | |
|----------------|--|----------------|--|

| | |
|---------------------|--|
| Hours of Operation: | |
|---------------------|--|

| | | |
|---------------------------------|---------|--|
| Sign Dimensions (See Note 1) | Height: | |
| | Width: | |

| | | | |
|-------------------|---------|------------------|-------------------|
| Fee: (See Note 2) | \$25.00 | Expiration Date: | December 31, 2023 |
|-------------------|---------|------------------|-------------------|

| | |
|-----------------|--|
| Application By: | |
|-----------------|--|

I understand I must keep a clear, unobstructed ADA compliant passage for pedestrian traffic on sidewalks or other passageway of 4 feet in width at all times.

| | |
|------------|--|
| Signature: | |
|------------|--|

-FOR OFFICE USE ONLY-

| | | | |
|--------------|--|-------|--|
| Received By: | | Date: | |
| Approved By: | | Date: | |

Note 1: Sign panel - 6 SF max on each of two (2) sides; Sign structure - 4 FT max height

Note 2: The fee is \$25.00 and allows for one (1) sign to be placed as detailed here in

Attachments:

- Certificate of Insurance (naming the City as an additional insured)
- Indemnity and Hold Harmless Agreement
- Photographs Showing the Existing Condition of the Sidewalk