CITY OF DECATUR ILLINOIS

#1 GARY K. ANDERSON PLAZA DECATUR, ILLINOIS 62523-1196 Phone: 217-424-2747 Fax: 217-424-2799 Email: engineeringforms@decaturil.gov

APPLICATION - SIDEWALK SIGN PERMIT

Please fill in all requested information.

		1	
Application Date:			
Legal Name of Business:			
Doing Business As:			
Business Address:		T	
Owner's Name:		Owner's Phone:	
Owner's Email:			
Store Manager:		24-Hour Phone:	
Hours of Operation:			
Sign Dimensions	Height:		
(See Note 1)	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:			
olgridate.			
	-FOR OFFICE U		
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			
A., 1			
Attachments:			
Certificate of Insurance (naming the City as an additional insured)			
Indemnity and Hold Harmless Agreement			
☐ Photographs Showing the Existing Condition of the Sidewalk			