



**City of Collinsville**  
**SIGN PERMIT APPLICATION – TEMPORARY SIGNS**  
 Department of Community Development  
 346-5200 Ext. 1143

THIS FORM MUST BE COMPLETED IN FULL OR APPROVAL WILL BE DELAYED. COMPLETE A SEPARATE FORM FOR EACH SIGN PROPOSED. PAYMENT MUST ACCOMPANY APPLICATION. ALLOW 5 WORKING DAYS FOR PROCESSING.

CONTACT NAME & ORGANIZATION \_\_\_\_\_ PHONE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ EMAIL \_\_\_\_\_

BUSINESS NAME WHERE SIGN IS TO BE PLACED \_\_\_\_\_ ADDRESS WHERE SIGN IS TO BE PLACED \_\_\_\_\_

BUSINESS OWNER OR MANAGER \_\_\_\_\_ BUSINESS MAILING ADDRESS \_\_\_\_\_

PROPERTY OWNER \_\_\_\_\_ PROPERTY OWNER'S MAILING ADDRESS \_\_\_\_\_

**DESCRIPTION OF SIGN:**

Width: \_\_\_\_\_ Height: \_\_\_\_\_

Name of Event/Text of Sign: \_\_\_\_\_

Dates of Sign Display: \_\_\_\_\_

*Temporary Signs are restricted to 3 per year for a maximum of 14 days each, which may be consecutive. Permit fee must be paid for each two week permit.*

**ATTACH COLOR RENDERING OR DRAWING OF SIGN SHOWING DIMENSIONS AND EXACT LOCATION ON BUILDING/LOT. ATTACH CURRENT COLOR PHOTOGRAPH OF ESTABLISHMENT SHOWING EXISTING SIGNS. SUFFICIENT INFORMATION MUST BE PROVIDED TO ALLOW FOR APPROPRIATE REVIEW.**

\_\_\_\_\_  
 SIGNATURE       Owner    Representative      PRINTED NAME (if Representative)

*For Office Use Only*

**TEMPORARY SIGN PERMIT FEE (Check One)**

**2 Weeks: \$50.00**                       **4 Weeks: \$100.00**                       **6 Weeks: \$150.00**

Date Received: \_\_\_\_\_ Sign Zone:   1   2   3   4

Approved by: \_\_\_\_\_ Date Approved: \_\_\_\_\_

Additional Requirements: \_\_\_\_\_