

City of Rockford, Illinois

Planning and Zoning Division
425 East State Street, Rockford, IL 61104
Phone: (779) 348-7158 Fax: (815) 967-4243
Web Site: www.rockfordil.gov



TEMPORARY SIGN PERMIT APPLICATION

ZONING CLEARANCE #: _____

(Please Type or Print)

1. Date of Application: _____
2. Address of proposed sign location: _____
3. Name of business to be advertised: _____
4. Name of business owner: _____ Phone: _____
5. Sign Contractor: _____ **Email Required**

(Address) (City) (State) (Zip)

5. License Number: _____ Phone: _____
6. Is this a BANNER SIGN ? YES NO
7. Is this an INFLATABLE SIGN ? YES NO
8. Installation: Is this sign freestanding ? YES NO

If NO how is this sign to be mounted? _____

9. Is this sign ILLUMINATED or NON-ILLUMINATED ?

NOTE: If sign will be illuminated then a separate electrical permit is required.

10. Sign SIZE: Height: _____ (x) Length: _____ (=) AREA _____ Square Feet
11. Sign HEIGHT: From grade to TOP of sign? _____ feet - _____ inches.
From grade to BOTTOM of sign? _____ feet - _____ inches.
12. Date to be erected? _____; Date to be removed? _____

* Temporary signs may be in place for not more than seven consecutive days, during a six month period, commencing with the issuance of a permit for such sign.

* Banners and other Temporary Signs shall be erected in compliance with Chapter 117 of the Rockford Municipal Code.

*** **MOBILE SIGNS ARE PROHIBITED** ***

Temporary signs must be anchored to the wall of the building with wire or steel cables. No strings, ropes or wood slats for anchorage or support purposes shall be permitted.

No more than two (2) temporary signs are permitted at any one time and each sign is limited to 200 square feet in area.

Signs may not exceed thirty feet (30') in height.

Signs may only be located in Commercial or Industrial zoning districts.

Failure to comply with provisions of the sign regulations is punishable by a fine as established in the provisions of Section 117 of the City of Rockford Codes and Ordinances.

Any misrepresentation or inaccuracy of facts contained on this form will result in this permit being declared null and void, and will require removal of the structure at the expense of the owner or applicant.

The applicant's signature below indicates the information contained in this application and on any accompanying documents is true and correct.

Signature: _____ Date: _____

Permit fees, a drawing or picture of the proposed sign and a site plan (if applicable) must be submitted with this application.

FOR ZONING OFFICE USE ONLY

Zoning District: _____ Zoning Clearance No.: _____

Any conflict with railroad or traffic signals? _____

Zoning Staff Comments: _____

Clearance issued by: _____ Date: _____

TEMPORARY SIGN PERMIT FEE: \$ _____ / Invoice Number: _____

Sign Inspection Date: _____ By: _____ Compliance: YES NO