

Temporary Use Application

1 Veterans Parkway, New Lenox, IL 60451

Phone (815) 462-6490 Fax (815) 462-6469

www.newlenox.net

APPLICANT INFORMATION

Name: _____ Phone: _____

Address: _____ City _____ State _____, Zip _____

SITE INFORMATION

Name of Subdivision / Project Name _____

Address / Location Description _____

Temporary Use Application for **Sign for Trailer**, please specify _____

Indicate size and height of sign _____

1. Submit a site plan showing the proposed location of the sign or the trailer.
2. Submit a drawing of the proposed sign.
3. Submit fee of \$100 for sign and trailer permits. Sign permits will also require a \$500 **CASH** deposit. (Cash Deposit can be made in the form of: cash, cashiers check, money order, and credit card of American Express, Discover or Master Card, no Visa accepted)

Temporary sign permits will be issued for a period of five years.

Temporary trailer permits will be issued for a period of six months.

FOR OFFICE USE

Date Paid _____

Amount Paid _____

Approved By _____

Date Approved _____

EXPIRATION DATE _____