SIGN PERMIT APPLICATION CITY OF CALUMET CITY-DEPARTMENT OF INSPECTIONAL SERVICES PHONE: 708-891-8120

FAX: 708-891-2128 -EMAIL: DIS@CALUMETCITY.ORG

DATE:		PERMIT #:			
ELECTRICAL INSPECTOR APPRO					
Property Owner:	Pł	none #:			
Construction Address:					
	DESCR	RIPTION OF WO	RK		
TYPE OF SIGN			SIZE OF SIGN		
New Sign Old	Sign		Length Height		
Illuminated Nor	_		Area (sq. ft.) Weight		
Projecting Roc					
Flat Sign					
SIGN INFORMATION			TYPE OF SUPPORT FOR SIGN		
Will a mast or roof structure over 12 feet high			Beam	Pole	
be used in connection with sign? Yes or No			Canopy		
be asea in connection with sig	11. 163 01 110		Ground Structure	Ballallig	
What is the height of FLAT SIG	N above		Ground Structure		
grade?			ELECTRICAL EQUIPTMEN	JT	
B. ddc			# of Lamps: Wattage		
Will upper edge of sign be high	ner than roof		# of Transformers or Ballasts _		
or building? Yes or No			Size of Rotary Converter		
or banding. Tes of the	WOF	RK DESCRIPTION	•		
Commercial Cost:					
Electrical Contractor:	Pho	ne #:	Address:		
City:	State:		Zip:		
Sign Erector:	Phone #:		Address:		
City:	State:		Zip:		
		_			
Permit Fee:	Inspection	Fee:	Total:		