



ARCHITECTURAL COMMISSION STRUCTURE / FIXTURE APPLICATION

The Architectural Commission meets every third (3rd) Monday of the month at 7:00 PM in the Village Hall or as otherwise posted. The applicant (or representative) must be present.

APPLICANT INFORMATION	
NAME	
BUSINESS (If applicable)	
ADDRESS	
PHONE NUMBER	
EMAIL	
PROPERTY OWNER NAME	
PHONE NUMBER	
EMAIL	
SQUARE FOOTAGE OF THE COMMERCIAL SPACE WHERE THE SIGN IS BEING INSTALLED	

FIRM ERECTING OR MANAGING STRUCTURE	
NAME	
ADDRESS	
PHONE NUMBER	
EMAIL	
CONTACT	

Please prepare and submit a set of the following information fourteen (14) days prior to the meeting.

INCOMPLETE APPLICATIONS WILL DELAY PROCESSING.

Description of project including structure / fixture: _____

Location of the structure on the property:

- ☐ Provide a site plan
- ☐ Provide photographs of the site

Drawing of planned structure / fixture

- ☐ Dimensions
- ☐ Elevations
- ☐ List materials to be used / sample of colors

The property owner's signature is required below before any application may be processed. It is understood by the property owner (s) that her or she has read and understands the regulations governing the commercial property under this application in the Village of Long Grove, accepts and is liable for any corrections or modifications required to meet the standards of the Village, and further provides the work to be done on their property.

Property Owner(s) Printed Name: _____

Property Owner(s) Signature: _____

Applicant Printed Name: _____

Applicant Signature: _____

SUBMIT YOUR APPLICATION ELECTRONICALLY

- Digital copies of permit applications, supporting plans, and documents are required
 - Email completed applications and materials to **longgrove@mundelein.org** and **forms@longgroveil.gov**
- Email your completed permit application and required attachments to the Long Grove Building Commissioner at **mromanello@longgroveil.gov**. Failure to include all the required attachments may delay the permitting process.
- Fees – See Building Permit Application for applicable fees.

FOR OFFICE USE ONLY

Date Received: _____

Permit Number: _____

Date Issued: _____

ARCHITECTURAL COMMISSION

☐ AC Received: _____

☐ AC Reviewed: _____

☐ AC Approved: _____

☐ Village Board Approval: _____

PAYMENT INFORMATION

Amount Paid: _____

Date Paid: _____