

**SIGN PERMIT**

Commercial

CITY OF DECATUR, ILLINOIS  
INSPECTION DIVISION  
424-2787

Permit Number: **2021-0129**

Zoning Abbr: B-2

Work Class: N/A

LOCATION OF WORK:

**345 E ASH AVE**

APPLICANT:

VITAL SKIN DERMATOLOGY  
345 E ASH AVE  
DECATUR IL 625260000

WORK DESCRIPTION:

1 Wall sign

CONTRACTORS

Sign: Bendsen Signs And Graphics

CONSTRUCTION COST: \$9,000.00

PERMIT FEE: \$180.00

**REQUIRED BY LAW ALL WORK MUST BE INSPECTED PRIOR TO BEING CONCEALED AND UPON COMPLETION OF WORK.**

The undersigned is the owner \_\_\_\_\_ authorized agent \_\_\_\_\_ of the described real property.

Signature of Applicant: \_\_\_\_\_

This permit is issued solely for the purpose set forth in the application approved on 2/17/2021 and is conditional upon strict compliance with provisions of the Zoning Regulations and the Building code now in force. This construction permit is subject to revocation upon any violations of the Zoning Regulations to the Building Code.

Payment Summary

Building Permit Fee:	180.00
Misc Permits/Fees:	.00
Plan Review Fee:	.00
Credit Memos Used:	0.00
<b>Total Due:</b>	<b>180.00</b>
Permit Fees Paid:	180.00
Misc Permit/Fees Paid:	.00
<b>Balance Due:</b>	<b>.00</b>



**Building Inspections Manager**  
(permit is not valid unless signed by the Inspections Supervisor or designee)

Application Date: 00/00/0000  
Issue Date: 2/17/2021  
Expire Date: 8/16/2021