City of Peoria
HONORARY STREET NAME SIGN APPLICATION
419 Fulton Street –Suite 307 ♦ Peoria, IL 61602 ♦ (309) 494-8802 ♦ www.ci.peoria.il.us

PURPOSE OF THE PROGRAM: The Honorary Street Name Sign Program allows citizens the opportunity to honor people that have made significant contributions to the Community. The program is administered by the Public Works Department. Street names will be displayed for a one year period. The sign will then be turned over to the respected party. Street designations will be determined on a case by case basis. The portion of a street so designated will be one block long. Final approval is given by the Director of Public Works. A completed application, plus a fee of $300 must be submitted prior to approval.

1. REQUIRED SUBMITTALS:
Please submit the following items along with your request:
- A typed request stating the designee and preferred location shall be received by the District Councilperson and recommended to the Director of Public Works. The statement should indicate why a particular section of street has been requested for the honorary designation.
- General location shall be limited to a single point or short segment with sign(s) posted at the point or near mid-block.
- Payment of the $300 fee for each installation is to be made to the Public Works Department prior to fabrication and installation of sign(s). The $300 fee is for a 2-faced sign on one side of the street.
- A $600 fee is for two (2) 1-faced signs, one on each side of the street, or for two 2-faced signs mounted at two separate locations.

2. DESCRIPTION:
- Legend shall be silver lettering on blue background.
- Sign(s) will be installed by City crews and shall remain in place for a period of twelve (12) months.
- Upon removal by City crews, the sign(s) will be given to the District Councilperson and donated to the designee’s family.
- Maintenance of the sign installation and/or replacement of the various materials shall be at the expense of the donator. Failure to cover the cost of the maintenance or replacement material(s) will cause the sign installation to be removed immediately.
3. **APPLICANT INFORMATION**

*Please print clearly*

Applicant’s Name: ____________________________________________________________

Organization/Company: _______________________________________________________

Street Address: ______________________________________________________________

Telephone: (____) Fax: (____) E-mail: __________________________________________

4. **HONORARY NAME REQUEST**

**NAME OF HONOREE:**

(As it would appear on the Street Name Sign)

**LOCATION:**

____________________________________________________________________________

**INTERSECTING STREETS AT EACH END OF THE ONE BLOCK AREA:**

____________________________________________________________________________

Please check all that apply and include a brief explanation for each of the applicable criteria.

_____ Cultural Impact to the City:

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

_____ Historical Impact to the City:

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
_____ Humanitarian Efforts:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

_____ Association with the City:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

_____ Geographical Relationship to Focus of Interest:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Is the individual Living or Deceased? (Circle one)

4. **Signature of Applicant:**
My application consists of the following items necessary for a complete application. Please check:

- [ ] Completed Application Form, **plus a $300 fee** (make checks payable to “City of Peoria”)
- [ ] A *typed* recommendation from the District Councilperson stating the designee and preferred location.

Signature of Applicant: ____________________________ Date: ________________

**Office use Only:**

Date Sign Installed: ____________________________

Date sign removed: ____________________________

Item No. 99-433 / Ordinance No. 14,614