



Department of Public Works  
 Division of Transportation  
 2100 Ridge Avenue  
 Evanston, Illinois 60201

Phone (847) 866-2922  
 Fax (847) 448-8118

**PAINT TRAILER PERMIT Valid from: \_\_\_\_\_ thru \_\_\_\_\_**

CONTRACTOR INFORMATION
Applicant Name: _____
Company: _____
Address: _____
City, State, Zip: _____
Phone Number: _____
E-Mail: _____
Fax: _____

FOR CITY USE ONLY
<b>SEE TRAILER INFORMATION</b>
_____ <i>PERMIT NUMBER</i>
_____ <i>DATE APPLICATION RECEIVED</i>
_____ <i>DATE APPLICATION APPROVED</i>
_____ <i>APPROVED BY</i>
_____ <i>PERMIT FEE</i>
_____ <i>PAYMENT DATE</i>
<u>cash</u> <u>check</u> <u>credit</u> <i>METHOD OF PAYMENT</i>
_____ <i>RECEIPT NUMBER</i> <i>Internal Account No. 2630.68205</i>

TRAILER INFORMATION
PLATE # / PERMIT # _____ / _____
PLATE # / PERMIT # _____ / _____
PLATE # / PERMIT # _____ / _____
PLATE # / PERMIT # _____ / _____
PLATE # / PERMIT # _____ / _____

**THE FOLLOWING ITEMS ARE TO BE SUBMITTED WITH THE APPLICATION**

**CERTIFICATE OF INSURANCE** valid for permit period, \$1,000,000 Min. naming "City of Evanston" as additional insured.  
**COPY OF TRAILER REGISTRATION**

**LIABILITY WAIVER (TO BE SIGNED BY AUTHORIZED COMPANY REPRESENTATIVE OR HOME OWNER)**

I request permission to place a paint storage trailer on the public right-of-way in the City of Evanston in accordance with Section 7-2-5 of the City Code. For consideration of such permission, I hereby fully release and discharge the City of Evanston, its officers, agents and employees from any and all claims from injuries, including death, damages or losses, which may arise or which may be alleged to have arisen out of, or in connection with, the placement of said trailer.

I further agree to indemnify and hold harmless and defend the City of Evanston, its officers, agents and employees, from any and all claims resulting from injuries, including death, damages or losses, including, but not limited to the general public, which may arise or which may be alleged to have arisen out of, or in connection with, the placement of said trailer.

Date: \_\_\_\_\_

\_\_\_\_\_  
signature of authorized company representative