



## CITY OF PARK RIDGE

505 BUTLER PLACE  
PARK RIDGE, IL 60068  
TEL: 847/ 318-5200  
FAX: 847/ 318-5300  
TDD:847/ 318-5252  
www.parkridge.us

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# KIOSK INFORMATION

### Kiosk locations

- 1 – Touhy & Summit (NE corner)
- 2 – Northwest Hwy. (south side of street / 6 corners)
- 3 – Prospect (across from the library by Einstein Bros Bagels)
- 4 – Prospect & Summit (southwest corner / train station side)
- 5 – Uptown Plaza by Houlihan's

### Poster Requirements

- Poster Dimensions: 31 ½ W x 46 H
- Paper Weight 80#
- Allow 1 ½ side margins for kiosk frame
- Rolled length-wise upon delivery to the Public Works Service Center located at 400 Busse Highway

### Step-by-Step Instructions

1) You are limited to displaying 2 posters at any given time. Arrangements can be made no sooner than 90 days prior to your event and will be considered on a first-come, first-served basis, date stamped upon receipt.

2) **Your poster design must be approved by the City.** Only City affiliated organizations will be considered. Please submit your design to Cheryl Peterson at [cpeterso@parkridge.us](mailto:cpeterso@parkridge.us), bring in a hard copy to the Administrative Services Department at City Hall, or fax it to 847/318-5300.

3) Upon receiving approval of your design from the City, please provide your printer with the poster requirements as indicated above.

4) Deliver your poster(s) to the Public Works Service Center located at 400 Busse Hwy **one week prior** to the posting date.

5) Indicate on the application whether you want your posters returned to you or discarded.

6) We will attempt to place your poster on the date you indicated. However, this task is done according to current workload priorities. We appreciate your understanding.

Revised April 9, 2018

#### *Our Mission:*

THE CITY OF PARK RIDGE IS COMMITTED TO PROVIDING EXCELLENCE IN CITY SERVICES IN ORDER TO UPHOLD A HIGH QUALITY OF LIFE, SO OUR COMMUNITY REMAINS A WONDERFUL PLACE TO LIVE AND WORK.



## KIOSK DISPLAY APPLICATION

Complete and return this form to the Administration Department at City Hall

City Hall  
505 Butler Place  
Park Ridge, IL 60068  
Phone: 847/318-5464  
Fax: 847/318-5300  
[cpeterso@parkridge.us](mailto:cpeterso@parkridge.us)

Applicant's Name \_\_\_\_\_

Contact Numbers: Cell: \_\_\_\_\_

Home: \_\_\_\_\_

Office \_\_\_\_\_

Email address: \_\_\_\_\_

Organization: \_\_\_\_\_

(Must be an organization within the City of Park Ridge for consideration)

Display Dates: From : \_\_\_\_\_ To: \_\_\_\_\_

Starts and ends on a Tuesday / Cannot exceed 45 days

Desired Poster Placement:            1   2   3   4   5

(Choose up to 2 locations)

Do you want the posters returned to you when taken down?

YES      NO

OFFICE USE ONLY -----

Design approved by: \_\_\_\_\_

Request faxed to PWSC by \_\_\_\_\_ date \_\_\_\_\_