

CITY OF WAUKESHA, WISCONSIN

201 DELAFIELD STREET \* ROOM 200 \* WAUKESHA, WI 53188 \* PH: (262)524-3750 \* FAX: (262)524-3751

PERMIT NUMBER

# PERMANENT SIGN PERMIT APPLICATION

SITE ADDRESS : West Northview Road

Total Number of signs applying for today: 1 Value of Sign(s) \$ 72,500.00  
FEE: \$40 min. or \$1 per sq. ft. Required in full at time of submittal. **FEE IS NON-REFUNDABLE.**

**ATTACH COLOR PHOTOS, DRAWINGS, AND/OR SITE PLAN.**  
Show dimensions to scale, colors, and location of sign.

Office Use Only

PICTURE/Drawing/Site Plan

FEE

ELECTRICAL PERMIT

Paid: \_\_\_\_\_ Initials: \_\_\_\_\_

Business Name: Tallgrass Villas

Property Owner Name: Tallgrass Villas, LLC

Business Phone: 262-548-5570

Sign Contractor: Poblocki Sign Company

Sign Contractor Phone: 414-777-4274  
Jim Pacioni

Permit copy will be  mailed or  emailed to this address

Address: 1830 Meadow Ln Suite A

City/State/Zip: Pewaukee, WI 53072

Email: j.donovan@bielinski.com  
John Donovan

For questions call:  Business  Sign Contractor

**(MANDATORY FIELD; application will be returned if left blank.)**

You must submit an electrical permit signed by a licensed electrician with all illuminated sign permit applications. HAS THIS BEEN DONE?  YES, Permit No. ELC - \_\_\_\_\_  NO  NOT APPLICABLE

Note: All electrical signs must be listed and labeled per NEC article 600.4(A). Are the labels present? Yes No

Premise Data: Street Frontage: Yes Building or Tenant Space Width: NA Other Street Frontage: 15' min.

SIGN 1.  
Location of THIS sign: see attach plan dated 10/16/23 for sign location

CHECK ONE:  New Sign  Existing Sign  Face Change Only

TYPE OF SIGN (circle one):  
Wall Projecting Window Roof Billboard Awning  
Reader-Board Menu-Board Monument Dual Post Pylon

Horizontal Width of Sign: 4'  
6'6"  
8'6" Vertical dimension of Sign: 5'  
1'  
1'5"10" Area of Sign: 30  
6.6" sq. ft. Total 35'  
8.6

If Sign is detached or projecting, please supply: Total Height 15'10" Clearance: - Setback: 15' R.O.W.

SIGN 2 (if applicable): NA  
Location of THIS sign: \_\_\_\_\_

CHECK ONE:  New Sign  Existing Sign  Face Change Only

TYPE OF SIGN (circle one):  
Wall Projecting Window Roof Billboard Awning  
Reader-Board Menu-Board Monument Dual Post Pylon

Horizontal Width of Sign: \_\_\_\_\_ Vertical dimension of Sign: \_\_\_\_\_ Area of Sign: \_\_\_\_\_ sq. ft.

If Sign is detached or projecting, please supply: Total Height \_\_\_\_\_ Clearance: \_\_\_\_\_ Setback: \_\_\_\_\_

**PLEASE LIST ALL EXISTING SIGNAGE ON THE BACK OF THIS SHEET.**

By my signature, I state and agree, that I have carefully examined the completed application and do hereby certify that all information herein is true and correct, and I further certify that any and all work performed shall be done in accordance with the Ordinances of the City of Waukesha, and the Laws of the State of Wisconsin pertaining to the work described herein

Legal Signature [Signature] Print Name Frank Bielinski Date 10/17/23

Planning staff will review your application and notify you of the result within ten business days of complete submission.

**INCOMPLETE APPLICATIONS MAY NOT BE PROCESSED**

**EXISTING SIGNS:**

Type: WA Location \_\_\_\_\_ Area: \_\_\_\_\_ sq. ft.  
Type: \_\_\_\_\_ Location \_\_\_\_\_ Area: \_\_\_\_\_ sq. ft.  
Type: \_\_\_\_\_ Location \_\_\_\_\_ Area: \_\_\_\_\_ sq. ft.  
Type: \_\_\_\_\_ Location \_\_\_\_\_ Area: \_\_\_\_\_ sq. ft.  
Type: \_\_\_\_\_ Location \_\_\_\_\_ Area: \_\_\_\_\_ sq. ft.

**TOTALS:**

Gross Sign Area: \_\_\_\_\_ sq. ft. Existing Sign Area: \_\_\_\_\_ sq. ft. New Sign Area \_\_\_\_\_ sq. ft.



PERMIT NUMBER

# Sign Appeals and Variances

Appellant Name:	<u>Tallgrass Villas, LLC</u>	Owner Name:	<u>Frank Bielinski</u>
Address:	<u>1830 Meadow Ln. Ste A</u>	Address:	<u>1830 Meadow Ln suite A</u>
City, St, Zip	<u>Pewaukee, WI 53072</u>	City, St, Zip	<u>Pewaukee, WI 53072</u>
Phone No.	<u>262-548-5570</u>	Phone No.	<u>262-548-5570</u>
Email	<u>jdouvan@bielinski.com</u> <u>John Donovan</u>	Email	<u>SAME</u>

Address of the premises affected \_\_\_\_\_

Northview Road

Name and Type of Business: \_\_\_\_\_

Bielinski Homes, Inc Residential Development

Present use of premises: \_\_\_\_\_

Two Family Condominiums

Briefly describe proposed sign request: \_\_\_\_\_

Permanent Condominium monument signage Identifying project name.

The appeal must be filed with the City Community Development Department within twenty (20) days of the decision of the City Planner accompanied by the \$100.00 fee. The Plan Commission will hear the appeal no later than 60 days after the date of your application.

### TO THE PLAN COMMISSION:

I hereby appeal the decision of the City Planner. I believe the City Planner has incorrectly interpreted Section \_\_\_\_\_ of the Waukesha Sign Code.

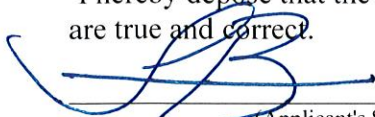
Or,

I hereby request a variance from Section \_\_\_\_\_ of the Waukesha Sign Code.

### **NOTE: attach a written statement explaining the basis for your appeal or request for a variance.**

- In the case of an appeal please include specific references to the provisions of Chapter 27 that you believe the City Planner has improperly applied, or which otherwise support your appeal.
- In the case of a variance, please include a description of the special circumstances that would make the strict application of the requirements of this Chapter unjust, inequitable, unfair, or unreasonable.

I hereby depose that the above statements and the statements contained in the papers submitted herewith are true and correct.



(Applicant's Signature)

Frank Bielinski

10/17/23

(Date)