

PERMANENT SIGN PERMIT APPLICATION

ONE APPLICATION PER SIGN

SITE ADDRESS: 431 W. MAIN ST.

Total Number of signs applying for today: 2 Value of Sign(s) \$ 4800.00

FEE: \$40 min. or \$1 per sq. ft. Required in full at time of submittal. FEE IS NON-REFUNDABLE.

Location of THIS sign: ABOVE DOOR ON BUILDING / FRONT OF PARKING LOT

Office Use Only

PICTURE/Drawing/Site Plan

FEE

ELECTRICAL PERMIT

Paid: _____ Initials: _____

Business Name: REALTY EXECUTIVES SOUTHWEST

Sign Contractor: DUALITY SIGN

Owner Name: STEPHEN GALLAMORE

Address: P.O. Box 931

Business Phone: 262-899-5462

City/State/Zip: MENOMONEE FALLS, WI 53052

For questions call: Business Sign Contractor

Phone: 414-349-6809

Permit copy will be mailed to this address

IF THIS IS AREA IS LEFT EMPTY, PERMIT WILL NOT BE MAILED.

(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. BL - - - NO NOT APPLICABLE

ATTACH A COLOR PHOTO, DRAWING, AND/OR SITE PLAN. Show dimensions to scale, colors, and location of sign.

CHECK ONE: New Sign Existing Sign Face Change Only

TYPE OF SIGN (Circle all that apply): Wall Door Projecting Window Roof Billboard
Flat Awning Freestanding Yard Double Face

1st Sign Horizontal Width of Sign 48" Vertical dimension of Sign 46" TOTAL Square Footage: 15.3 sq. ft.

2nd Sign If Sign is detached or projecting please supply: Total Height 35" Clearance: 94" Setback: _____

Premise Data: Street Frontage: _____ Building or Tenant Space Width: _____ Other Street Frontage: _____

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 DAVID KROUSCHMAREL Date 6/2/21

OFFICE USE ONLY

Zoning District: _____ Gross sign area for premises: _____ Area used by other signs: _____

Approved Conditions (if any):
 Must submit electrical permit within 30 days of meeting or permit shall be voided.

Denied Does not conform to:

Height Architecturally compatible Not to face R-district Clearance Area Corner Vision
 Projection Avoid needless elaboration Consolidation of signs Distracting sign Setback Other

Authorized Signature _____ Date of Review _____

INCOMPLETE APPLICATIONS MAY NOT BE PROCESSED.

Review Board meets the 3rd Monday of the month at 8:15 am. DEADLINE IS THE MONDAY BEFORE THE MEETING.

REGRAMS @ WAUKESHA - WI. 6/2/21