CITY OF WAUKESHA, WISCONSIN

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

PERMANENT SIGN PERMIT APPLICATION

Office Use Only SITE ADDRESS: 2831 N. Grandv. en Blud #101, Prowder WI. ☐ PICTURE/Drawing/Site Plan Total Number of signs applying for today: Z Value of Sign(s) \$ 23.561 1157.8 FEE FEE: \$40 min. or \$1 per sq. ft. Required in full at time of submittal. FEE IS NON-REFUNDABLE. ☐ ELECTRICAL PERMIT Location of THIS sign: Exterior Walls) - Front of Buildry ___ Initials: _ Permit copy will be mailed to this address Sign Contractor: Signworks Business Name: Remax Reality Center Owner Name: Jamie Ireland Address: 50 l Business Phone: 267-317-0349 City/State/Zip: Her I Ford, UII. S3027 For questions call: Business Sign Contractor Phone: 262-673-7318 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: TYPE OF SIGN (Circle all that apply): (Wath Door **Projecting** Window Roof Billboard Flat Awning Freestanding Yard **Double Face** Horizontal Width of Sign_ 120 Vertical dimension of Sign_30 **TOTAL Square Footage:** sq. ft. If Sign is detached or projecting, please supply: Total Height _____ Clearance: ____ Setback: Premise Data: Street Frontage: 47 +75'? Building or Tenant Space Width: 50' Other Street Frontage: 56' 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 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 Avoid needless elaboration ☐ Projection Consolidation of signs ☐ Distracting sign Setback ☐ Other Date of Review Authorized Signature

INCOMPLETE APPLICATIONS MAY NOT BE PROCESSED.





REÁLTY CENTER 262-232-8480 wisconsinhousehunt.com





30×120" Polymetal Option C



262-232-8480 wisconsinhousehunt.com

Date: 2/7/17 2017 Sketches-By Name/Remax Realty Center/Polymetal Signs 2017



CITY OF WAUKESHA, WISCONSIN

Authorized Signature

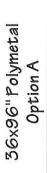
201 DELAFIELD STREET * ROOM 200 * WAUKESHA, WI 53188 * PH: (262)524-3750 * FAX: (262)524-3751

PERMANENT SIGN PERMIT APPLICATION

Office Use Only SITE ADDRESS: 2831 N. Grandvew Blud #101, Pewerker WI. 53672 ☐ PICTURE/Drawing/Site Plan ___ Value of Sign(s) \$ _1/6 7.80 Total Number of signs applying for today: ___ ☐ FEE FEE: \$40 min. or \$1 per sq. ft. Required in full at time of submittal. FEE IS NON-REFUNDABLE. ☐ ELECTRICAL PERMIT Location of THIS sign: Exterior Wall - Bock of building __ Initials: _ Permit copy will be mailed to this address Business Name: Remove Reality Center Signworks Sign Contractor: Owner Name: Jame Ireland Address: SU\ W. Business Phone: 7.67 - 312 - 0349 City/State/Zip: Hertford, WI. For questions call: Business Sign Contractor Phone: 262-673-73/8 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: TYPE OF SIGN (Circle all that apply): New Sign Existing Sign Face Change Only (Wall) Door Projecting Window Roof Billboard Awning Yard Freestanding **Double Face** Vertical dimension of Sign 36 TOTAL Square Footage: Horizontal Width of Sign If Sign is detached or projecting, please supply: Total Height _____ Clearance: ____ Setback: _ Other Street Frontage: 17 / +75'? Premise Data: Street Frontage: 56' Building or Tenant Space Width: 50' 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 an Schmeter Legal Signature OFFICE USE ONLY Gross sign area for premises: _ Area used by other signs:_ Zoning District: Approved Conditions (if any): Must submit electrical permit within 30 days of meeting or permit shall be voided. **Denied** Does not conform to: ☐ Clearance ☐ Architecturally compatible ☐ Not to face R-district ☐ Area ☐ Corner Vision ☐ Height ☐ Consolidation of signs ☐ Distracting sign ☐ Setback Other ☐ Avoid needless elaboration □ Projection

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Date of Review





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