

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

ONE APPLICATION PER SIGN

SITE ADDRESS: 810 Progress Ave, Waukesha WI 53186Total Number of signs applying for today: 2 Value of Sign(s) \$ 2,481
FEE: \$40 min. or \$1 per sq. ft. Required in full at time of submittal. **FEE IS NON-REFUNDABLE.**Location of THIS sign: off of Progress Ave, near
entrance to parking lot.Business Name: SPX Transformer SolutionsOwner Name: Luterbach Construction Co.Business Phone: 262-446-8447For questions call: ☒ Business ☐ Sign ContractorSign Contractor: Triad Creative GroupAddress: 3130 Intertech DriveCity/State/Zip: Brookfield, WI 53186Phone: 262-781-3100

Office Use Only

☐ PICTURE/Drawing/Site Plan☐ FEE☐ ELECTRICAL PERMIT

Paid: _____ Initials: _____

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 FaceHorizontal Width of Sign 4 ft Vertical dimension of Sign 2 ft 10 in TOTAL Square Footage: 11.33 sq. ft.

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

Premise Data: Street Frontage: .24 Building or Tenant Space Width: 165.98 Other Street Frontage: _____
acres ft**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 Dominique Lettiere Print Name Dominique Lettiere Date 11/13/2017

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

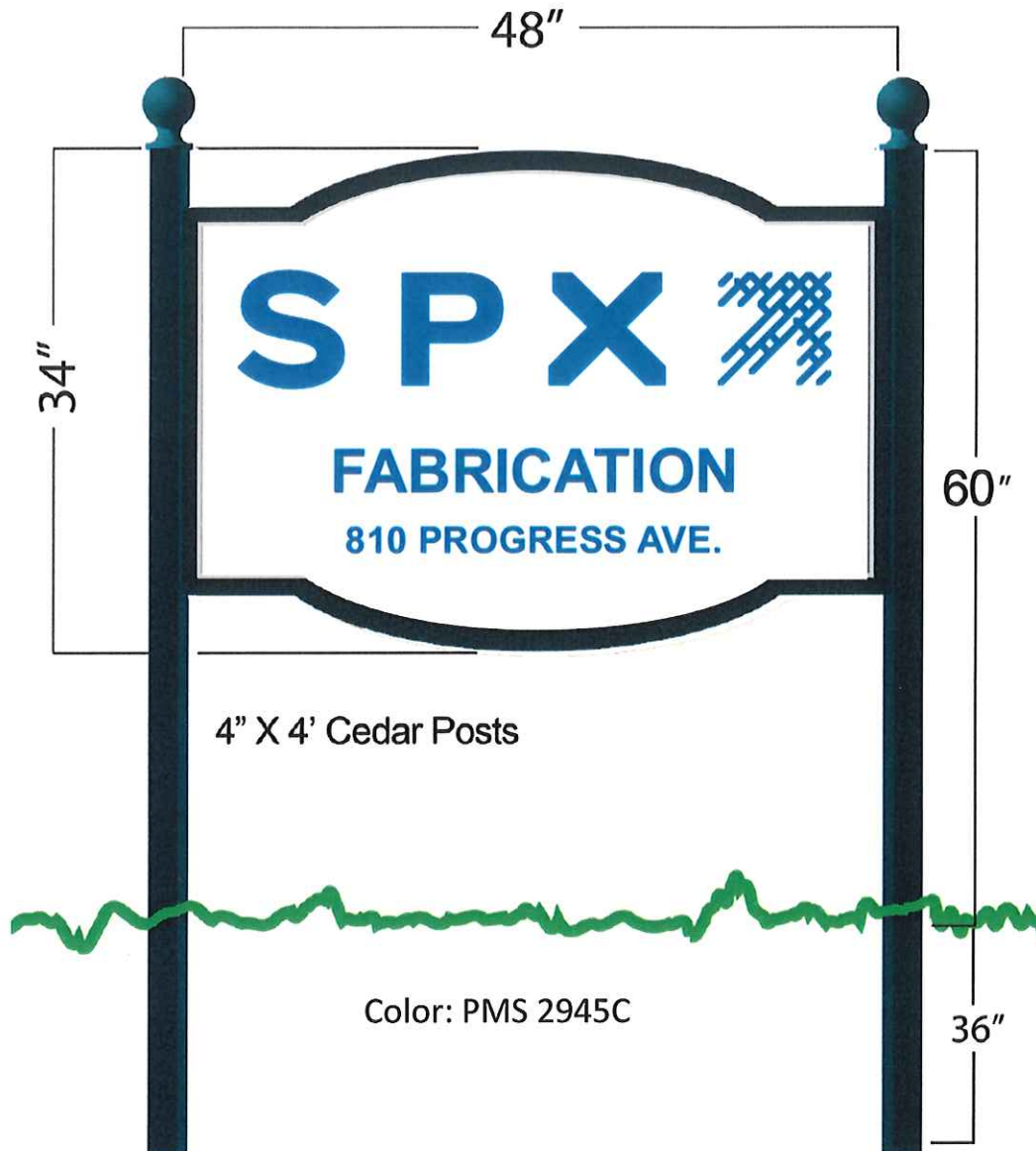
Authorized Signature

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.

Freestanding Sign





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Business Name: SPX Transformer SolutionsSign Contractor: Triad Creative GroupOwner Name: Waterbach Construction Co.Address: 3130 Intertech DriveBusiness Phone: 262-446-8447City/State/Zip: Brookfield, WI 53186For questions call: ☒ Business ☐ Sign ContractorPhone: 262-781-3100

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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 FaceHorizontal Width of Sign 3 ft Vertical dimension of Sign 2 ft TOTAL Square Footage: 6 sq. ft.

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

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Building Sign

