

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: 403 N. GRAND AVETotal Number of signs applying for today: 1 Value of Sign(s) \$ 13,000FEE: \$40 min. or \$1 per sq. ft. Required in full at time of submittal. FEE IS NON-REFUNDABLE.Location of THIS sign: 403 N. GRAND AVE

Office Use Only

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

Paid: _____ Initials: _____

Permit copy will be mailed to this address

Business Name: W.C.A.M.Sign Contractor: FASTSIGNS OF WAUKESHAOwner Name: JOHN HINZAddress: 1560 E. MORELAND BLVD.Business Phone: 262-547-1411City/State/Zip: WAUKESHA, WI 53186For questions call: ☐ Business ☐ Sign ContractorPhone: 262-288-1199

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-ELC18 00011 ☐ 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 88" Vertical dimension of Sign 84" TOTAL Square Footage: 51.33 sq. ft.

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

Premise Data: Street Frontage: _____ Building or Tenant Space Width: 50' 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

Andrew Dominik

Print Name

ANDREW DOMINIAK

Date

6/14/18

OFFICE USE ONLY

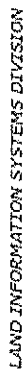
Zoning District: B3 Gross sign area for premises: _____ Area used by other signs: _____☐ Approved Conditions (if any):☐ Must submit electrical permit within 30 days of meeting or permit shall be voided.☐ Denied Does not conform to:☐ Height☐ Architecturally compatible☐ Not to face R-district☐ Clearance☐ 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.



Waukesha County GIS Map



Legend

Retired Plats

Assessor Plat

Condo Plat

CSM

Subdivision Plat

Simultaneous Conveyance

Assessor: Plat

CSM

Condo Flat


Subdivision Plat

The information and depictions herein are for informational purposes and Waukesha County specifically disclaims accuracy in this reproduction and specifically admonishes and advises that if specific and precise accuracy is required, the same should be determined by procurement of certified maps, surveys, plats, Flood Insurance Studies, or other official means. Waukesha County will not be responsible for any damages which result from third party use of the information and depictions herein, or for use which ignores this warning.

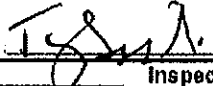
Notes:

Printed: 6/13/2018

48 W" x 84 H"

 WCAM <small>WALKESHA COMMUNITY ACUPUNCTURE</small>
FACE: 20" X 84"
FACE: 20" X 84"
DIGITAL: 20" X 84"

403

PERMIT NO: E_ELC18-00011 ON-LINE PERMIT			
WAUKESHA 201 Delafield St # E, WI 53186	PERMIT TYPE ETRAKIT ELECTRICAL COMMERCIAL	APPLIED DATE 6/14/2018	
INSPECTION REQUEST LINE (262) 524-3530 OR REQUEST INSPECTION ON-LINE THROUGH eTRAKIT https://permits.waukesha-wi.gov/etrakit/	PERMIT SUB-TYPE	APPROVED DATE	
	JOB VALUE 890	ISSUED DATE	
	APN 134955		
DESCRIPTION Wiring sign outside front of building			
PERMIT INFORMATION		FEE SUMMARY	
SITE	403 N GRAND AVE WAUKESHA, WI 53186	ELECTRICAL - APPLIANCES, HVAC, MOTORS, EXT LIGHTING	\$0.00
APPLICANT	Pieper Electric Inc 5477 Westridge Ct New Berlin WI 53151	ELECTRICAL - SERVICES, OUTLETS, SIGNALING, FIXTURES	\$1.00
OWNER	JAH PROPERTIES LLC W1672 COUNTY RD F SULLIVAN WI 53178	ELECTRICAL PERMIT MINIMUM	\$59.00
CONTRACTOR	Pieper Electric Inc 5477 Westridge Ct New Berlin WI 53151	Total Fees Collected:	\$60.00
<small>NOTE: This job copy of this permit shall be kept on the job site to make the required entries thereon. The permit will expire if work is not started in 180 days, is abandoned, or does not receive an inspection for more than 180 days. Additional fees will be collected to renew expired permits. This is a Building Permit when properly filled out, signed and validated, and is not transferable.</small>			
The undersigned hereby applies for a permit to do work herein described according to the plans and specifications filed herewith. The undersigned agrees that such work will be done in accordance with the said descriptions, plans and specifications in compliance with the building, zoning and health ordinances and all other ordinances of the City of Waukesha and with all laws and orders of the state of Wisconsin applicable to said premises. The undersigned further applies for a permit to occupy the premises described herein for the uses and purposes as herein set forth and in strict accordance with all the provisions of the City of Waukesha zoning and health ordinances and all other ordinances of the City of Waukesha and State of Wisconsin applicable to said premises. This permit is in effect for 18 months from date of issue unless work is not started within 120 days of issue date, or activity ceases for more than 120 days, after which this permit shall lapse. Double fees shall be charged if work is started before permit is issued. Work covered before inspection will be required to be totally exposed for inspection.		INSPECTION SUMMARY	
SIGNATURE OF APPLICANT OR AGENT 		DATE <u>6-14-18</u>	
Permit Finaled Date: <u> </u>		Inspector Name: <u> </u> Signature: <u> </u>	