Town of West Bend - Washington County, Wisconsin APPLICATION for SIGN PERMIT

Name of Property Owner:						
Address:						
Phone:	Email:					
Name of Applicant (if different from	Property	y Owner)	:			
Address:						
Phone:						
Property Description:						
Tax Key #(s)				Cu	rrent Z	oning:
Property is currently used for the foll	owing pu	ırposes: _.				
	0.1	•				
Description of existing signs (compl						
Sign Type (Wall, Projecting, Ground, Pole, Ingress/Egres Marquee/Awning/Canopy)	SS,	<u>Height</u>		<u>Width</u>		Total Face Area
		ft	in	ft	in.	sq. ft.
		ft	in	ft	in.	sq. ft.
		ft	in	ft	in.	sq. ft.
		ft	in	ft	in.	sq. ft.
Will the sign(s) be lighted?	Yes		No _			
If yes, please describe:						

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Description of proposed signs (complete for all proposed signs requiring a sign permit):

<u>Sign Type</u> (Wall, Projecting, Ground, Pole, Ingress/Egress, Marquee/Awning/Canopy)	<u>Height</u>	<u>Height</u>			Total Face Area	
	ft	in	ft	in.	sq. ft.	
	ft	in	ft	in.	sq. ft.	
	ft	in	ft	in.	sq. ft.	
	ft					
	ft					
Will the sign(s) be lighted?	Yes	No _				
If yes, please describe:						
Application Checklist: (This Application shall be completed in formation below submitted as attachment to this Application checking each item below). Names and addresses of the applicant contractor, and all opposite and a Location of building, structure, o Written Consent of the owner or the sign is to be affixed. A Scale Drawing of such sign indicating the location of structures.	icant, owner of the butting property related to which or lessee of the butting the dime od of construction	ter Chapter 1 frm inclusion the site, archi y owners of the tupon which ilding, struct insions, the non and attacl	itect, proferecord. the sign is ture, or landaterials to ment.	ne Zoning nired info ssional e to be att d to whice	ordinance, is rmation by ngineer, cached or erected. The or upon which the type of	
Copies of any other permit requi the Electrical Inspector; in the cas specifications, re-inspecting all w Town Electrical Code.	se of illuminated	l signs, who s	shall exami	ne the pl	ans and	

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Additional Information as may be required by the Inspector, or Plan Commission.	Town Board, Zoning Administrator, Building
Application Fee: (\$100.00)	Check Number:
	Amount:
Applicant Signature:	Date:
Town Clerk Signature:	Date:
<u>Professional Services Fee</u> :	
The Town of West Bend has determined that whenever to Inspector, Town Engineer, Town Attorney, or any other rengineering, and other professional and technical advice time and services, the Town Clerk shall charge such services owner even if the request is not approved.	Town staff, as well as outside legal, planning, results in a charge to the Town for professional
I have been advised that if the Zoning Administrator, Bui or any other Town staff provides services to the town be engineering, and other professional and technical advice request of the Town, I shall be responsible for the fees in approved.	cause of my activities, or outside legal, planning, is required, whether at my request or the
Owner Signature:	Date: