

PROJECTING & CANOPY / AWNING SIGN PERMIT APPLICATION

- Each projecting, canopy, and awning sign requires a separate sign permit.
- Incomplete applications or the required submission procedures not being correctly followed may delay approval and/or cause the sign application to be returned.
- No fees are due when this application (and required attachments) is submitted. Upon permit approval, the City will notify applicant of the permit cost and how the permit can be obtained.
- Sign installation prior to obtaining the required sign permit is a Municipal Code violation.

For more information, or a complete copy of the sign code, contact the Department of Community Development at (262) 335-5140 or see Sections 17.47(4)(d) and 17.48 of the City's Municipal Code for sign requirements on the City's website at www.ci.west-bend.wi.us.

Property Owner or Tenant (Please Type or Print)

Name: _____
Address: _____
Phone: _____ Cell #: _____
Fax: _____
E-Mail: _____

Sign Contractor (Please Type or Print)

Name: _____
Address: _____
Phone: _____ Cell #: _____
Fax: _____
E-Mail: _____

Property Description (Please Type or Print)

Business Name: _____
Address: _____

Zoning District(s): _____

SECTION A – GENERAL SIGN INFORMATION

Type of Proposed Sign: PROJECTING CANOPY AWNING
 ILLUMINATED NON-ILLUMINATED

Sign Details:

Overall sign dimensions: width _____ x height _____ = _____ sq. ft.

Dimensions of the area of copy: width _____ x height _____ = _____ sq. ft.

The distance between the bottom of the sign and the ground surface beneath it: _____ ft. _____ in.

The ground surface material below the sign is: _____ Depth (thickness) of sign: _____ inches

The sign will project _____ feet and _____ inches from the building.

***Identify the total sign area of all existing signs attached to the building (include wall signs).**

Sign 1 width _____ x height _____ = _____ sq. ft. Sign 3 width _____ x height _____ = _____ sq. ft.

Sign 2 width _____ x height _____ = _____ sq. ft. Sign 4 width _____ x height _____ = _____ sq. ft.

***Identify the total area (width X height) of each building wall:**

Wall 1 width _____ x height _____ = _____ sq. ft. Wall 3 width _____ x height _____ = _____ sq. ft.

Wall 2 width _____ x height _____ = _____ sq. ft. Wall 4 width _____ x height _____ = _____ sq. ft.

Required Attachments

*A scaled architectural building elevation (or photo) identifying the sign location and dimensions.

*A scaled sign drawing identifying the letters, dimensions, background, colors, and the sign materials. Include any changeable copy or electronic message board features.

SECTION B – ELECTRICAL (If sign is lighted)

Is the sign internally illuminated? Yes No

If YES, then SECTION B must be completed and complied with. If NO, go to SECTION C.

- All sign wiring shall comply with the National Electric Code – Section 600.
- All illuminated signs must be wired by an electrical contractor licensed by the City (permit req'd).
- Multiple signs may be included on one electrical permit application.

Sign Manufacturer: _____

Listing Agency: (circle one) UL ETL CSA Other _____

Electrical Contractor: _____

NOTE: ALL LISTED SIGNS ARE REQUIRED TO BE INSPECTED ON-SITE PRIOR TO INSTALLATION IN ORDER TO VERIFY THE LISTING.

SECTION C – EXTERNALLY ILLUMINATED SIGNS

- Externally illuminated signs (non-electric signs) are not required to be listed.
- An Electrical Permit is required by the city to wire external lighting.

SECTION D – ACKNOWLEDGEMENT

- I have read and understand the above sign requirements and procedures.
- I understand that all illuminated signs require an inspection by the City’s Electrical Inspector PRIOR to erecting the sign. Failure to call (262) 335-5140 for an electrical inspection PRIOR to installation may cause the sign to be required to be removed so that it can be inspected.
- Upon completion of the required electrical inspection, the sign installation, and the required landscaping, I understand that I am required to call (262) 335-5140 for a final sign inspection.

SIGNATURE OF APPLICANT

DATE

Please make a copy of this completed application (for your records) prior to submission.

PRINT NAME

For Office Use Only

Approved _____
Date Zoning Administrator

Conditions of Approval: _____

Denied _____ Reason Denied _____
Date

Permit # _____ Date Issued _____ Required Fees \$ _____ SP- ___ - ___