

**Sign Permit Application**  
**CITY OF KEWAUNEE**  
**401 Fifth Street**  
**Kewaunee, WI 54216**  
**Building Inspector (920) 388-5005**

PERMIT NO. _____
DATE: _____

Applicant: \_\_\_\_\_

Name of Business: \_\_\_\_\_

Address of Business: \_\_\_\_\_

Address of Building, structure or lot where the sign is to be attached or erected:  
\_\_\_\_\_ Zoning Classification: \_\_\_\_\_

Tax Parcel ID # of sign location \_\_\_\_\_

Applicant's Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ Do You Own this building? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If you do not own the property where you are placing or erecting the sign, please submit a letter of authorization from the property owner)

Property Owner (s) \_\_\_\_\_  
(Please list a contact name for the company that owns the building)

Mailing Address \_\_\_\_\_ Telephone \_\_\_\_\_

Name of person, firm, corporation, or association erecting the sign \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Type of Sign \_\_\_\_\_ Type of Materials \_\_\_\_\_

Length of Sign \_\_\_\_\_ Height of Sign \_\_\_\_\_ One or Two-sided sign \_\_\_\_\_

List and describe all other signs located on the lot:

<u>Type of Sign</u>	<u>Size of Sign</u>	<u>Placement of Sign</u>
_____	_____	_____
_____	_____	_____

If sign is an off-premise sign visible from a state or federal highway, a Wisconsin Department of Transportation permit may be required. Contact Richard Happel, WisDOT District 3 Sign and Permit Coordinator at (920)492-5689 for further information.

**Please submit with your application:**

- One set of accurately scaled drawings of the plans, contents, specifications, and method of construction and attachment to the building or the ground for the sign must be submitted.
- A scaled drawing of the site showing drives, structures, setbacks from utility lines, property lines and street right of way and other site features must be submitted if you are requesting a pole or ground sign.
- A true colored picture or drawing of the proposed signage.
- Each application for a sign permit must be accompanied by a paying a nonrefundable permit fee of **\$35.00**.

I hereby make application for a Sign Permit to the City of Kewaunee, Wisconsin. I do hereby swear or affirm that the information provided here and above is true, complete and accurate, and I understand that any inaccuracies may be considered just cause for invalidation of this application and any action taken on this application. I understand that the City of Kewaunee, Wisconsin, reserves the right to enforce any and all ordinances regardless of any action or approval on this application. I further understand that it is my/our responsibility to conform with all City of Kewaunee Ordinances in full. I hereby acknowledge that all requirements of the City of Kewaunee shall be adhered to. I can read and write the English language and/or this document has been read and explained to me and I have fully and voluntarily completed this application.

\_\_\_\_\_  
Applicant signature

Date: \_\_\_\_\_

The issuance of a Sign Permit in no way allows the applicant to violate any regulation or ordinance of the City of Kewaunee. Nor will the issuance of a sign permit be interpreted to allow for any violation of any ordinance or regulation of the City of Kewaunee, Wisconsin.

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**FOR OFFICIAL USE ONLY**

**CONSTRUCTION OF SIGN AUTHORIZED:**

Assigned Permit Number: \_\_\_\_\_

Square Footage Authorized: \_\_\_\_\_ Height \_\_\_\_\_

Setbacks Authorized: \_\_\_\_\_ Front Yd. \_\_\_\_\_ Side Yd. \_\_\_\_\_ Rear Yd.

Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CONSTRUCTION OF SIGN NOT AUTHORIZED:**

Reasons: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE \_\_\_\_\_ Building Inspector: \_\_\_\_\_ Cert. No. \_\_\_\_\_