



## **CITY OF SHEBOYGAN**

## **SIGN PERMIT** APPLICATION

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

Fee: \_\_\_\_\_

SECTION 1: Applicant/ Permittee Infor	mation				
Name (Ind., Org. or Entity) Valley City Sign	Authorized Representative Crystal Walkons		Title Permit Administrator		
Mailing Address 5009 West River Dr	City Comstock Park		State MI	ZIP Code 49321	
Email Address cwalkons@valleycitysign.com	Phone Number (in 616-785-5713		cl. area code)		
SECTION 2: Landowner Information (c	omplete these field	s when project site o	wner is diff	ferent than applicant)	
Name (Ind., Org. or Entity) Tommy's Express Car Wash	Contact Person		Title		
Mailing Address 3627 Washington Ave	City Sheboygan		StateZIP CodeWI53081		
Email Address	40	Phone Number (in	cl. area code	e)	
SECTION 3: Description of the Propose	ed Sign and Use of t	ne Subject Site			
Name of Proposed/existing business: T	ommy's Express Car Wa	sh			
Address of property affected: 3627 Wash	nington Ave S Frontage R	Rd			
Use of property: Car Wash		Type of Sign: Direction	onal		
Description of sign:					
Directional - Enter					
<b>SECTION 4: Configuration of Proposed</b>					
Height: 47.75"	Width: 24"		Total Squa	are Footage: 2.33sf	
Height: 47.75" Amount of public street frontage: 220' o	Width: 24" on Washington Ave				
Height: 47.75" Amount of public street frontage: 220' c Amount of exposed exterior wall lengt	Width: 24" on Washington Ave			are Footage: 2.33sf 0' from the easement line	
Height: 47.75" Amount of public street frontage: 220' of Amount of exposed exterior wall lengt Method of Attachment: Direct bury	Width:24" on Washington Ave h:N/A				
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to be placed on the agenda of the City Plan Commission or Architectural Review Board, application must be filed three weeks prior to date of meeting - check with City Development on application submittal deadline date. Applications will not be processed if all required attachments and filing fee (payable to the City of Sheboygan) are not submitted along with a complete and legible application. Application filing fee is non-refundable.

### **APPLICATION SUBMITTAL REQUIREMENTS**

- a. *For new development*, the approved site plan for the subject property, showing the location and dimensions of all buildings, structures, signs on the subject property, property boundaries and dimensions; and the location of the proposed sign.
- b. <u>For existing development</u>, a site plan approved by the City Planner & Zoning Manager, showing the location and dimensions of all buildings, structures, signs on the subject property, property boundaries and dimensions; and the location of the proposed sign.
- c. A scale drawing of the proposed sign listing the height, width, total square footage, method of attachment, method of illumination, sign materials, design and appearance.
- d. The subject property's zoning classification.
- e. The total area of all signs on the subject property both before and after the installation of the proposed sign.
- f. Provide three 8.5 x 11 color renderings of proposed sign. Attach any superimposed photos, photos or drawings that may help in reviewing sign application.

## Notes

Any information submitted on the application will become public record and is not subject to confidentiality.

Applicant is required to obtain a Sign Permit from the Building Inspection Department, Second Floor, City Hall, 828 Center Avenue.

Permit may be revoked without notice if misrepresentation of any of the above information or attachments is found to exist.

Permit shall expire within one (1) year from date of approval unless substantial work has commenced.

**Permit is null and void** if issued in error. It is understood that any permit issued on this application will not grant any right or privilege to erect any sign or to use any permits for any purpose that is prohibited by the City Zoning Ordinance or any other State or local laws.

Office Use Only

## ACTION BY DEPARTMENT OF CITY DEVELOPMENT – SIGN PERMIT APPLICATION

APPROVED: \_\_\_\_\_ CONDITIONALLY APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_

**CONDITIONS:** 

SIGNATURE: \_\_\_\_\_

DATE:	

Steve Sokolowski City Planner & Zoning Manager



Fee: \_\_\_\_\_



#### **CITY OF SHEBOYGAN**

## SIGN PERMIT **APPLICATION**

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

SECTION 1: Applicant/ Permittee Infor	mation				
Name (Ind., Org. or Entity)	Authorized Representative		Title Permit Administrator		
Valley City Sign	Crystal Walkons				
Mailing Address	City		State		ZIP Code
5009 West River Dr	Comstock Park		MI		49321
Email Address		Phone Number (incl. area code)			
cwalkons@valleycitysign.com		616-785-5713	- 1992.01		100 XX
SECTION 2: Landowner Information (co	omplete these fields	when project site o	wner is diffe	erent tha	n applicant)
Name (Ind., Org. or Entity)	Contact Person		Title		
Tommy's Express Car Wash				r	
Mailing Address	City		State		ZIP Code
3627 Washington Ave	Sheboygan		WI		53081
Email Address		Phone Number (inc	l. area code	)	
<b>SECTION 3: Description of the Propose</b>	d Sign and Use of th	e Subject Site			
Name of Proposed/existing business: To	ommy's Express Car Was	sh			
Address of property affected: 3627 Wash	ington Ave S Frontage R	d			
Use of property: Car Wash		Type of Sign: Directio	nal		
Description of sign:					
Directional - Exit					
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Height: 47.75"	Width: 24"		Total Squa	re Footag	ge: 2.33st
Amount of public street frontage: 220' o	n Washington Ave				
Amount of exposed exterior wall length	n: N/A		Setback: 10	' from the e	easement line
Method of Attachment: Direct bury			_		
Method of Illumination: LED internal illumi	nation				
Sign Materials: Aluminum					
Total square footage of signs on subject	t property – Before	proposed sign:	Afte	r propose	ed sign:
SECTION 5. Certification and Permissio	on				
Certification: I hereby certify that I am	the owner or autho	rized representative	of the owne	er of the p	property which is
the subject of this Sign Permit Applicat	ion. I certify that the	e information contain	ied in this fo	orm and a	attachments are
true and accurate. I certify that the pro	ject will be in compl	liance with all conditi	ons. I under	rstand th	at failure to
comply with any or all of the provisions	s of the permit may	result in permit revoo	cation and a	fine and	/or forfeiture
under the provisions of applicable laws	<b>.</b>				
Permission: I hereby give the City pern	nission to enter and	inspect the property	at reasonat	ole times,	, to evaluate this
notice and application, and to determine	ne compliance with	any resulting permit	coverage.		
Name of Owner/Authorized Represent	ative (please print)	Title	1	Phone Nu	
Crystal Walkons		Permit Administrato		616-785-	5/13
Signature of Applicant	200		Date Signe	d	07
1'a allen	X '		2-	10-	20
Complete application is to be filed with	the pepartment of C	City Development, 82	8 Center Av	enue, Su	ite 208. If required
I I I I I I I I I I I I I I I I I I I	lan Commission or /	Architectural Review	Board appli	ication m	just be filed three

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CONDITIONS:

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Steve Sokolowski City Planner & Zoning Manager

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Sheboygan	

## **CITY OF SHEBOYGAN**

## **SIGN PERMIT APPLICATION**

Review Date:

Fee:

Read all instructions before completing. If additional space is needed, attach additional pages.

SECTION 1: Applicant/ Permittee Infor	mation				
Name (Ind., Org. or Entity)	Authorized Representative		Title		
Valley City Sign	Crystal Walkons		Permit Administrator		
Mailing Address	City		State		ZIP Code
5009 West River Dr	Comstock Park		MI		49321
Email Address		d. area cod	e)		
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SECTION 2: Landowner Information (co	omplete these fields	s when project site o	Title	rerent tha	in applicant)
Name (Ind., Org. or Entity) Tommy's Express Car Wash	Contact Person		Title		
Mailing Address	City		State		ZIP Code
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Email Address		Phone Number (ind	cl. area cod	e)	
SECTION 3: Description of the Propose	ed Sign and Use of th	ne Subject Site			
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Address of property affected: 3627 Wash	hington Ave S Frontage R	d Tumo of Ciana Direction			
Use of property: Car Wash		Type of Sign: Direction	JNAI		
Description of sign:					
Directional - Clean Car Exit / Interior Clea					
SECTION 4: Configuration of Proposed	Sign				
Ticigite 4110					e: 2.33sf
Height: 47.75"	Width: 24"		Total Squ	are Footag	ge: 2.33sf
Amount of public street frontage: 220' c	Width: 24" on Washington Ave				ge: 2.33sf
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to be placed on the agenda of the City Plan Commission or Architectural Review Board, application must be filed three weeks prior to date of meeting - check with City Development on application submittal deadline date. Applications will not be processed if all required attachments and filing fee (payable to the City of Sheboygan) are not submitted along with a complete and legible application. Application filing fee is non-refundable.

### APPLICATION SUBMITTAL REQUIREMENTS

- a. <u>For new development</u>, the approved site plan for the subject property, showing the location and dimensions of all buildings, structures, signs on the subject property, property boundaries and dimensions; and the location of the proposed sign.
- b. <u>For existing development</u>, a site plan approved by the City Planner & Zoning Manager, showing the location and dimensions of all buildings, structures, signs on the subject property, property boundaries and dimensions; and the location of the proposed sign.
- c. A scale drawing of the proposed sign listing the height, width, total square footage, method of attachment, method of illumination, sign materials, design and appearance.
- d. The subject property's zoning classification.
- e. The total area of all signs on the subject property both before and after the installation of the proposed sign.
- f. Provide three 8.5 x 11 color renderings of proposed sign. Attach any superimposed photos, photos or drawings that may help in reviewing sign application.

## Notes

Any information submitted on the application will become public record and is not subject to confidentiality.

Applicant is required to obtain a Sign Permit from the Building Inspection Department, Second Floor, City Hall, 828 Center Avenue.

Permit may be revoked without notice if misrepresentation of any of the above information or attachments is found to exist.

Permit shall expire within one (1) year from date of approval unless substantial work has commenced.

**Permit is null and void** if issued in error. It is understood that any permit issued on this application will not grant any right or privilege to erect any sign or to use any permits for any purpose that is prohibited by the City Zoning Ordinance or any other State or local laws.

Office Use Only

# ACTION BY DEPARTMENT OF CITY DEVELOPMENT – SIGN PERMIT APPLICATION

APPROVED: \_\_\_\_\_ CONDITIONALLY APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_

CONDITIONS:

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Steve Sokolowski City Planner & Zoning Manager