

	CITY OF SHEBOYGAN SIGN PERMIT APPLICATION	Fee: _____ Review Date: _____ Zoning: _____
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Read all instructions before completing. If additional space is needed, attach additional pages.

SECTION 1: Applicant/ Permittee Information			
Name (Ind., Org. or Entity) Sign Me Up of Wisconsin, LLC	Authorized Representative Brian Dunton	Title President	
Mailing Address 311 Forest Avenue	City Sheboygan Falls	State WI	ZIP Code 53085
Email Address BDunton@SignMeUpofWI.com	Phone Number (incl. area code) 920-550-0009		
SECTION 2: Landowner Information (complete these fields when project site owner is different than applicant)			
Name (Ind., Org. or Entity) St. John's United Church of Christ	Contact Person William Knaak	Title President	
Mailing Address 1248 Lincoln Ave	City Sheboygan	State WI	ZIP Code 53081
Email Address	Phone Number (incl. area code) 920-452-5296		
SECTION 3: Description of the Proposed Sign and Use of the Subject Site			
Name of Proposed/existing business: St. John's United Church of Christ			
Address of property affected: 1248 Lincoln Ave			
Use of property: Appliance, Church		Type of Sign: Monument sign on SW corner	
Description of sign: Existing sign – old sign cabinet and Electronic Message Center to be removed and replace with new Sign cabinet and EMC			
SECTION 4: Configuration of Proposed Sign –			
Height: 84" tall sign cabinet	Width: 56" sign cabinet	Total Square Footage: 32.66	
Amount of public street frontage: 88 feet			
Amount of exposed exterior wall length:		Setback: n/a	
Method of Attachment: Two brackets mounted to inside of existing Brick pillars			
Method of Illumination: Internally-illuminated			
Sign Materials: Aluminum / Polycarbonate / Paint			
Total square footage of signs on subject property – Before proposed sign: 32 After proposed sign: 32.66			
<p>Certification: I hereby certify that I am the owner or authorized representative of the owner of the property which is the subject of this Sign Permit Application. I certify that the information contained in this form and attachments are true and accurate. I certify that the project will be in compliance with all conditions. I understand that failure to comply with any or all of the provisions of the permit may result in permit revocation and a fine and/or forfeiture under the provisions of applicable laws.</p> <p>Permission: I hereby give the City permission to enter and inspect the property at reasonable times, to evaluate this notice and application, and to determine compliance with any resulting permit coverage.</p>			
Name of Owner/Authorized Representative (please print) Brian Dunton	Title President	Phone Number 920-550-0009	
Signature of Applicant Brian Dunton		Date Signed 6-5-2023	

Complete application is to be filed with the Department of City Development, 828 Center Avenue, Suite 208. If required 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. For existing development, 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: _____
Steve Sokolowski
City Planner & Zoning Manager

DATE: _____