City of Sheboygan spirit on the lake	**CITY OF SHEBOYGAN** **ARCHITECTURAL REVIEW APPLICATION**	**Fee:** _____ **Review Date:** _____

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

SECTION 1: Applicant/ Permittee Information

Name (Ind., Org. or Entity)	Authorized Representative	Title	
The Mighty Three Stripe LLC	Matt Zingsheim	Vice President of Finance	
Mailing Address	**City**	**State**	**ZIP Code**
1420 S 16th St	Sheboygan	WI	53081
Email Address	[redacted]	**Phone Number (incl. area code)**	[redacted]

SECTION 2: Landowner Information (Complete These Fields When Project Site Owner is Different than Applicant)

Name (Ind., Org. or Entity)	Contact Person	Title	
		ce	
Mailing Address	**City**	**State**	**ZIP Code**
Email Address		**Phone Number (incl. area code)**	

SECTION 3: Architect Information

Name			
Gries Design - Brannin Gries			
Mailing Address	**City**	**State**	**Zip**
500 North Commercial St	Neenah	WI	53081
Email Address	[redacted]	**Phone Number (incl. area code)**	[redacted]

SECTION 4: Contractor Information

Name			
Keller, Inc - Logan Ferrie			
Mailing Address	**City**	**State**	**Zip**
PO Box 620	Kaukauna	WI	54130
Email Address	[redacted]	**Phone Number (incl. area code)**	[redacted]

SECTION 5: Certification and Permission

Certification: I hereby certify that I am the owner or authorized representative of the owner of the property which is the subject of this Architectural Review 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.

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.

Name of Owner/Authorized Representative (please print)	Title	Phone Number
Matt Zingsheim	Vice President Finance	[redacted]
Signature of Applica Signed by: Matt Zingsheim AEF1E92C3EB14B6...		**Date Signed** 7/28/2026

Complete application is to be filed with the Department of City Development, 828 Center Avenue, Suite 208. To be placed on the agenda of the 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 of $100 (payable to the City of Sheboygan) are not submitted along with a complete and legible application. Application filing fee is non-refundable.

SECTION 6: Description of the Subject Site/Proposed Project

Project Address/Description	Parcel No.
4337 County Rd A, Sheboygan, WI 53081	

Name of Proposed/Existing Business:	Northland Plastics
Address of Property Affected:	4337 County Rd A, Sheboygan, WI 53081
Zoning Classification:	Suburban Industrial

New Building: ☑ Addition: ☐ Remodeling: ☐

SECTION 7: Description of Proposed Project

Proposed new building with associated site improvements. See site plans for additional information.

SECTION 8: Description of EXISTING Exterior Design and Materials

Current existing lot is vacant agricultural farmland.

SECTION 9: Description of the PROPOSED Exterior Design and Materials

The exterior features a cool color palette designed to align with Northland Plastics' branding while visually harmonizing with surrounding properties, including Old Wisconsin to the east, Kohler to the south, and Crossroads Community Church to the north. The main entrance and employee entrance canopies feature grey ACM panels.