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) Quasius Construction, Inc.	Authorized Representative Gary Gartman	Title Director of Project Development	
Mailing Address PO Box 727	City Sheboygan	State WI	ZIP Code 53082
Email Address ggartman@quasius.com	Phone Number (incl. area code) (920) 377-1566		

SECTION 2: Landowner Information (Complete These Fields When Project Site Owner is Different than Applicant)			
Name (Ind., Org. or Entity) Paper Box and Specialty Company	Contact Person Joe Van Der Puy	Title Owner	
Mailing Address 1505 Sibley Ct.	City Sheboygan	State WI	ZIP Code 53081
Email Address joe@weareboxes.com	Phone Number (incl. area code) (920) 459-2440		

SECTION 3: Architect Information			
Name NA			
Mailing Address	City	State	Zip
Email Address	Phone Number (incl. area code)		

SECTION 4: Contractor Information			
Name Quasius Construction, Inc.			
Mailing Address PO Box 727	City Sheboygan	State WI	Zip 53082
Email Address ggartman@quasius.com	Phone Number (incl. area code) (920) 377-1566		

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
Gary Gartman	Director of Project Development	(920) 377-1566

Signature of Applicant	Date Signed
	8/4/2026

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.
1505 Sibley Ct.	59281606612

Name of Proposed/Existing Business:	Paper Box & Specialty Co
Address of Property Affected:	1505 Sibley Ct.
Zoning Classification:	Urban Industrial District

New Building: ☐ Addition: ☐ Remodeling: ☐

SECTION 7: Description of Proposed Project

Residing of the east portion (building on the corner of Calumet Drive & Sibley Ct.) of the Paper Box & Specialty Company.

SECTION 8: Description of EXISTING Exterior Design and Materials

Current exterior siding is vertical aluminum in green color. Product is no longer available and unable to be repaired from the wind damage that occurred earlier this year.

SECTION 9: Description of the PROPOSED Exterior Design and Materials

Remove existing siding and wood furring. Install new galvanized furring to receive new factory finished vertical steel siding with matching trim. New steel siding is McElroy Metal Multi-V panel in Patina Green color with accent area panels in Evergreen color as shown in the elevation renderings.


PAPER BOX &
Specialty
Co.


PAPER BOX
OPEN
Specialty Co


PAPER BOX &
Specialty Co.

Sibley Ct

92531573

Sibley Ct N 15th St

N 15th St

Calumet Dr

Lincoln Ave

92531584

Saemann Ave

N 16th St

N 15th St

1615

1615A

1629

1623

1619

1505

PANELS ABOVE LOWER ROOF

1906

1902

1514

1542

1532

1522

1520

1514B

1502

1634

1628

1624

1618A

1618

1614A

1614

1610A

1610

1600

1602

1540

1536

1524

1627

1623

1617

→ SIDING REPLACEMENT EXTERIOR WALLS

ArcGIS Web Map

SITE PLAN

0 30 60 ft

1" = 50'

N

ate Printed: 8/4/2026