

TOWN HALL OFFICE ATTN: TOWN CLERK 2445 S. AFTON ROAD BELOIT, WISCONSIN 53511-8663 PHONE: 608-364-2980 FAX: 608-364-2999

SIGN PERMIT APPLICATION

Application Number Provided by Town

Applicant Information				
Name of Applicant:	Email Address:			
Address of Applicant:	Phone Number:			
City/ST/Zip:	Fax Number:			
In making this application the undersigned agress to abide by the rules and regulations of Ordinance 10.03.11 Sign				

Regulations pertaining to sign promulgated by the Town of Beloit, and the special conditions that may be applied to this use as descriped below. Furthermore, I affirm that the information contained in this applications is true and correct to the best of my knowledge.

Printed Name Applicant's S	Signature Da	ate		
Property Owner Information				
Name of Property Owner:	Email Address:			
Address of Property Owner:	Phone Number:			
City / ST / Zip:	Fax Number:			

I am aware and approve of this application for a sign permit, and agree that should the applicant default in the maintenance of the proposed sign, or in any of the terms and conditions of this permit, I shall assume responsibility for correcting any deficiency and maintaining compliance thereafter. If this property is owned by any corporation, partnership, trust, or other entity, I affirm that I am the duly authorized representative of that entity.

Printed Name	Property Owner's Signature Date		Date	
Project Description				
Project Location Street Address:		Property Zor Classificatior	-	
Abutting Streets:		Parcel Numb	er:	
Type of Sign (circle one): Wall Sign	Projecting Sign	On-Premise Ground Sign	Off-Premise Advertising Sign	
Off-Premise Directory Sign Other:				
Number of businesses on the property:		Number of existing busines	s signs on the property:	
Dimensions of the proposed sign: How many p		How many printed faces to	ny printed faces to this sign:	
Type of structure this sign will be mounted on:				
Maximum height of this sign, as measured from ground level:				
Setback of the sign from each of the abutting road rights-of-way on the property:				
Setbacks of the sign from adjacent property lines:				
Will this sign be illuminated?	If yes, How:		# of lumens:	
Name and address of the person/firm who will produce this sign:				
Name and address of the person/firm who will erect this sign:				

*** ATTACH A PLAN of the proposed sign showing dimensions and support structures*** ***ATTACH A SKETCH of the property showing the location of all existing and proposed signs, and their distances from road rights-of-way and property lines*** Sign Permit Fees as of 1/1/2017				
Residential Sign: Commercial Sign: Temporary Commercial Sign: Sign Review	 \$ 25.00/each \$ 150.00/each plus \$0.25/per \$ 10.00/each \$ 50.00/each (if necessary) 	sf		
	For Offical Use Only			
C	OMPLIANT NONCOMPLIANT			
 USE NUMBER TYPE MAINTENANCE LOCATION DIMENSION 	[]] []] []] []] []] []] []] []] []] []] []] []] []] []] []] []] []] []] []] []] []] []] []] []] []] []]			
THIS SIGN PERMIT APPLICATI	ION IS: [] APPROVED	[] DISAPPROVED		
Comments and Conditions: This permit, if issued, is subject to the control of Beloit and the following special speci		ral Zoning Ordinance 10.03.11 of the		
 This sign shall be removed within ninety (90) days following the date the business, service or activity it identifies, or pertains to, ceases to exist. Every sign and sign support structure shall be erected in conformance with the Building Code. No sign may extend over or encroach upon any yard setback area or public easement except by Conditional Use Permit. Signs that are lit, or in other manner use electricity, shall be constructed in conformance with the State Electrical Code. Illuminated signs, singularly or as a group, may not direct any light onto or across any residential property unless it is diffused to less than 0.4 foot candles. Illuminated signs, singularly or as a group, may not pose a threat to vehicular traffic, or interfere with the safe observation of traffic control devices. 				
Permit Number	Zoning Administrator	Date		
For Office Use: Receipt Number:	_ Fee Paid:	_ Date Paid: Form Revised 8/21/19		