



County of Door LAND USE SERVICES

County Government Center
421 Nebraska Street
Sturgeon Bay, WI 54235

Phone: (920) 746-2323

FAX: (920) 746-2387

Website: www.co.door.wi.gov/164/Land-Use-Services

APPLICATION FOR SIGN PERMIT

TO THE ZONING ADMINISTRATOR. The undersigned hereby makes application for a SIGN PERMIT for the work described and located as shown herein. The undersigned agrees that all work shall be done in accordance with the requirements of the Door County Comprehensive Zoning Ordinance.

1. OWNER OF SIGN

Name: _____

Mailing Address Fire #: _____

Street: _____

City: _____ State: _____ Zip: _____

Home Phone #: _____ - _____ - _____

Daytime Phone #: _____ - _____ - _____

Email address: _____

Business Location Tax Parcel Number:

_____ - _____ - _____

Signature: _____

Date: _____

2. OWNER OF PROPERTY

Check box if same as "OWNER OF SIGN" above.

Name: _____

Mailing Address Fire #: _____

Street: _____

City: _____ State: _____ Zip: _____

Home Phone #: _____ - _____ - _____

Daytime Phone #: _____ - _____ - _____

Signature: _____

Date: _____

3. LOCATION OF SIGN

Fire #: _____

Road: _____

Town of _____

Tax parcel number:

_____ - _____ - _____

4. TYPE OF SIGN AND DIMENSIONS (See Attached)

5. SIGN PLANS (See Attached) **Must be drawn to scale**

6. SITE PLAN (See Attached) **Must be drawn to scale**

7. FEE: **\$ 100.00**

Check may be made payable to "Door County Treasurer".

Note: Double fee will be charged for projects started without permit.

Receipt# _____ Fee _____ Date _____

8. AUTHORIZATION FOR INSPECTION

I hereby authorize the Zoning Administrator(s) to enter and remain in or on the premises for which this application is made at any reasonable time for all purposes of inspection relative to this petition.

9. SIGNATURE OF APPLICANT OR AGENT:

Date: _____

(FOR OFFICE USE ONLY)

Zoning District: _____

Core Area: Yes / No

Long-Term Residential Use: Yes / No

Home-Based Enterprise: Yes / No

Business Establishment: Yes / No

Inspections:

Date	Inspector	Remarks
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Sign Permit Issued: (by) _____ (date) _____ (for) _____

(w/conditions) _____

Sign Permit Denied: (by) _____ (date) _____ for the following reasons: _____



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**PROJECT SCOPE DECLARATION
[2017 Wisconsin Act 68; Effective November 29, 2017]
and AUTHORIZATION FOR INSPECTION**

Please provide a description of your project.

§ 66.10015(2)(b), Wisconsin Statutes, provides as follows:

“If a project requires more than one approval or approvals from one or more political subdivisions and the applicant identifies the full scope of the project at the time of filing the application for the first approval required for the project, the existing requirements applicable in each political subdivision at the time of filing the application for the first approval required for the project shall be applicable to all subsequent approvals required for the project, unless the applicant and the political subdivision agree otherwise.”

Please check which of the following two statements applies to this project.

- This is the first application filed for the project in which the full scope of the project has been identified. I acknowledge and understand that, for purposes of § 66.10015(2)(b), Wis. Stats., the full scope of the project is identified in this application.
- This is not the first application filed for this project where the full scope of the project was identified. The first application was filed with the Town/Village/City/County/State of _____ on the ____ day of _____, 20 _____. I acknowledge and understand that, for purposes of § 66.10015(2)(b), Wis. Stats., the full scope of the project was identified in the first application.

This Declaration is incorporated into and made part of the associated Door County application.

By signing and submitting this form, I also hereby authorize the Zoning Administrator(s) to enter and remain in or on the premises for which this application is made at any reasonable time for all purposes of inspection relative to this application.

Property Owner(s) Name(s):

Signature _____

Date: _____

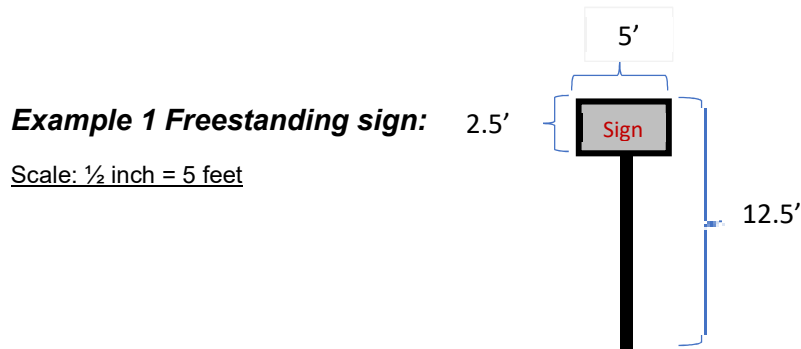
Signature: _____

Date: _____

Parcel Number (of Project): _____ - _____ - _____

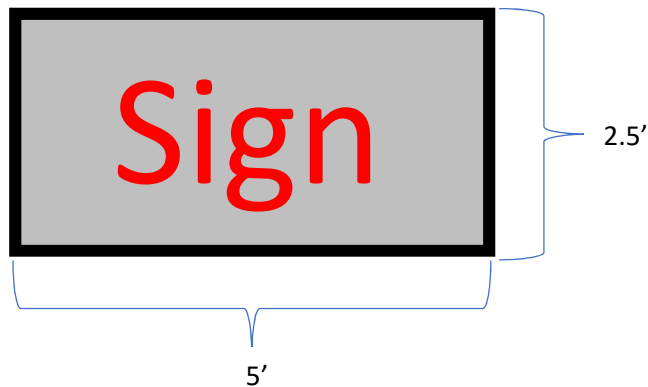
Fire Number & Street Address (of Project): _____

Include with your sign permit application a drawn to scale plan for each sign, showing all dimensions and message/logo (both sides if applicable).



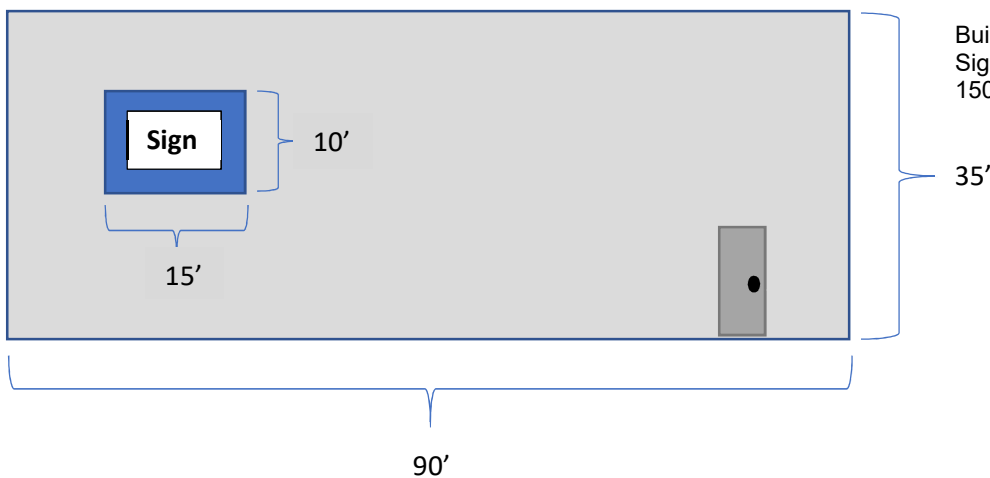
Sign face message/logo:

Scale: $\frac{1}{2}$ inch = 1 foot



Example 2 Wall sign:

Scale: $\frac{1}{4}$ inch = 5 feet



Calculation for wall sign (maximum size limit is 15% of the building wall face):

Building: $90' \times 35' = 3150$ square feet

Sign: $15' \times 10' = 150$ square feet

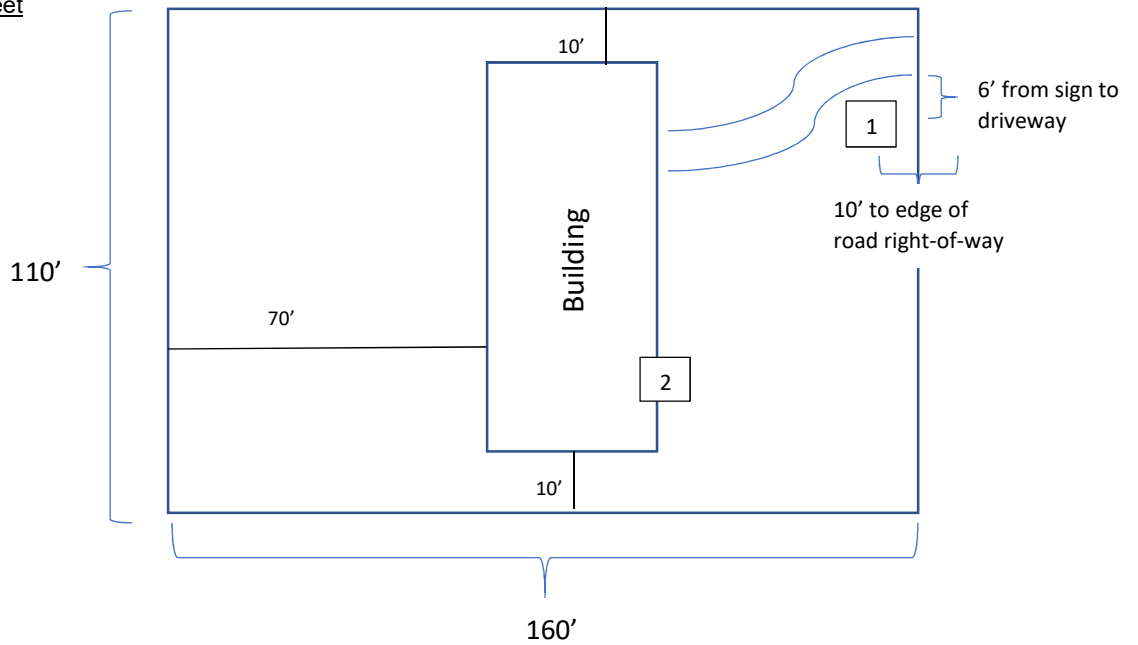
$150 \div 3150 = 4.67\%$

A drawn to scale Site Plan labeling each sign location (by number) which shows the following:

- Distance to the edge of the public or private road right-of-way/easement.
- Distance to the side lot lines.
- Distance to navigable waterways (e.g., lake, pond, river, stream, etc.).
- Distance to any other freestanding sign(s) on the same property as the proposed sign.
- Distance to building(s)/structure(s), driveway, or parking area serving the use. (All signs shall be located within 50 feet of at least one of these).

Site Plan Example:

Scale: $\frac{1}{4}$ inch = 10 feet





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SIGN INFORMATION

Complete the following information regarding the type(s) of signs for which you are applying and the dimensions of each sign.

	<u>Sign as Numbered on Site Plan</u>	<u>Type of Sign</u>	<u>Sign Face Width</u>	<u>Sign Face Height</u>	<u>Scope of Work</u>
<i>Example:</i>	<u>1</u>	<u>Freestanding sign</u>	<u>5 feet</u>	<u>2 feet 6 inches</u>	<u>Replacement of sign face</u>
	<u>2</u>	<u>Wall sign</u>	<u>15 feet</u>	<u>10 feet</u>	<u>New sign</u>

Type of Sign examples:

Wall/Window Sign



Projecting Sign



Freestanding Sign



Local Arrowboard Sign



Scope of Work examples:

- New sign face &/or supporting structure
- Replacement of sign face &/or supporting structure