



www.greenbaywi.gov

Sign Permit Application

COMMUNITY SERVICES AGENCY
Inspection Division
100 N. Jefferson Street, Rm. 608
Green Bay, WI 54301
(920) 448-3300 - phone
(920) 448-3117 - fax
inspmail@greenbaywi.gov

General Information: Complete application, submit copy of plan and sign details with supporting documentation demonstrating compliance with Sec. 13.2000, Regulation of Signs, Green Bay Municipal Ordinance prior to commencing installation.

Project Address: _____ Parcel #: _____ Zoning: _____ Project #: _____

Applicant Applicant is: <input type="checkbox"/> Property Owner <input type="checkbox"/> Sign Contractor	Property Owner (Required if other than Applicant)
Name	Name
Company	Company
Address	Address
City, ST ZIP	City, ST ZIP
Phone # Fax #	Phone # Fax #
Email	Email

Site Plan - [13-2004(a)] Provide a scaled site plan showing property lines, street(s), location of buildings, structures, drives, parking areas, and location of proposed sign and its supporting structure. Also, list all existing signs on the property below.

List & describe all existing signs on property (provide additional sheet if necessary) Check if NON-CONFORMING

1. _____

2. _____

3. _____

Construction Specifications - [13-2004(b)] Provide scaled drawings showing sign design, size, materials to be used, method of construction, lighting, and means of attachment to the building or the ground. Illuminated signs are required to have labels attached, one from a listed nationally recognized testing lab and separate label indicating the manufacturer's name, input amperes and voltage, both labels must be visible from the ground after installation, and the sign must have an externally operable disconnect.

Sign Type: Awning Canopy Building Pole Monument Off-Premise Billboard Projecting Temporary – Display Period _____

Fixed Face: Width _____ X Height _____ Area _____ SF, Illuminated - Internally Externally, # of Faces _____

Reader Bd: Width _____ X Height _____ Area _____ SF, Illuminated - Internally Externally, # of Faces _____

Sign Construction _____ Est. Sign Cost \$ _____

Sign Contractor	Electrical Contractor (Required if sign is illuminated)
Name	Name License # (s.17.07)
Company	Company
Address	Address
City, ST ZIP	City, ST ZIP
Phone # Fax #	Phone # Fax #
Email	Email

Professional Engineer (Required where Item 2 of Conditions of Approval applies)

Name _____ Registration # _____ Email _____ Phone # _____

Applicant Signature _____ Date _____

- Conditions of Approval** - See attached for additional conditions
- If work herein authorized is suspended or abandoned for one year any time after commencing work, this permit shall become null & void.
 - All signs exceeding 150 sq. ft. in area per side shall be designed by, and within five days of installation, shall be certified by a professional engineer registered in the State of Wisconsin that such sign meets all state and local construction requirements.
 - Signs having an electrical permit require a final inspection by the electrical inspector.

\$ _____ Sign Permit Fee \$ _____ Elec. Permit Fee \$ _____ Site Plan Review Fee \$ _____ Total Permit Fee _____ Receipt # _____ Date Issued

Zoning Inspector _____ Building Inspector _____ Electrical Inspector _____