

**VILLAGE OF EGG HARBOR PLAN COMMISSION**

P.O Box 175, Egg Harbor, WI 54209  
Phone 920-868-3334 Fax 920-868-9507

**APPLICATION FOR SIGN PERMIT**

**NUMBER** \_\_\_\_\_

**OWNER OF SIGN**

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_  
Street \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**OWNER OF PROPERTY**

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Day Phone \_\_\_\_\_  
Street \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Tax Parcel No. \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**LOCATION OF SIGN**

Street Address \_\_\_\_\_

**ZONING DISTRICT** \_\_\_\_\_

**DIMENSIONS OF SIGN**

Width \_\_\_\_\_ Height \_\_\_\_\_  
Include drawing of sign, showing lettering, etc.

**SITE PLAN**

Attach drawing showing the following:  
Distance to center line of road \_\_\_\_\_ ft  
Distance to closest side lot line \_\_\_\_\_ ft  
Distance to driveway at right of way line \_\_\_\_\_ ft

**TYPE OF SIGN**

- Business Identification Sign
- Canopy Sign
- Directional Sign
- Directional On-Premise
- Directional Off-Premise
- Ground Sign
- On-Premise Sign
- Projecting Sign
- Wall Sign
- Window Sign
- Other (Describe) \_\_\_\_\_

**FEE:** Make check payable to Village of Egg Harbor in the amount of \$ \_\_\_\_\_

**AUTHORIZATION FOR INSPECTION**

I hereby authorize the Zoning Administrator to enter and remain in or on the premises for which this permit is requested at any reasonable time for purposes of inspection relative to this petition.

**APPLICANTS SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**FOR OFFICE USE ONLY**

Permit issued (by): \_\_\_\_\_ Date \_\_\_\_\_

Payment by: \_\_\_\_\_ Ck#: \_\_\_\_\_ Amt.: \$ \_\_\_\_\_ Date: \_\_\_\_\_

W/Conditions \_\_\_\_\_

Permit Denied (by): \_\_\_\_\_ Date \_\_\_\_\_

For following reasons \_\_\_\_\_