



City of Kenosha
 Department of Neighborhood Services and Inspections
 625 52nd Street, Room 100, Kenosha, WI 53140
 Phone: 262.653.4263, Fax: 262.653.4254

Office Use Only:

APPLICATION FOR SIGN

This document must be legible or will be returned.

Note: You will be notified when your permit is ready; please do not submit payment with permit application.

A drawing or photo (size 8 1/2" x 11" or 11" x 17") is required for all signs indicating location on building wall surface.
 A photo and site plan (size 8 1/2" x 11" or 11" x 17") are required for all ground signs denoting location and setbacks from property lines.

Project Address _____ Contractor's e-mail address _____

Project Name _____ Contractor _____

Mailing Address _____ Mailing Address _____

City _____ State _____ Zip _____ City _____ State _____ Zip _____

Phone (____) _____ Phone (____) _____

City of Kenosha Sign Erector's License No.: _____

Estimated Cost _____ / _____ *Applicant Signature _____
 (include structural / electrical costs)

Size _____ by _____ Sq. Ft. _____ Number of Sign Faces _____
 (calculate total surface area for monument signs)

Setbacks (required for ground signs): Front _____ Rear _____ Left _____ Right _____ Height _____

CHECK ONE (Sign Type): Wall _____ Pole/Ground Mounted _____ Monument _____ Projecting _____
 Unified Business Center Sign _____ Canopy/Awning _____ Wall Banner _____

List all existing signs on subject property: _____

DESCRIPTION	PRICE PER UNIT	QUANTITY
PER SQ. FT. PER SIGN FACE	\$ 1.00 per sq. ft.	_____
SIGN MINIMUM FEE	\$ 75.00	_____

CHECK ONE: Illuminated: Yes No Electrical Connections: Yes No

Indicate type of electrical work _____

Contractor Name: _____

Address: _____

City, State, Zip: _____

Wisconsin Master Electrician's License No.: _____

*Wisconsin Master Electrician's Signature: _____

Print Name: _____

Office Use Only:

DESCRIPTION	PRICE PER UNIT	QUANTITY
MINIMUM ELECTRICAL FEE	\$ 75.00 Ea.	_____

**I agree to comply with all applicable codes, statutes, and ordinances, and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and, certify that all the above information is accurate. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done.*

Inspection Required: ☎ Call 262.653.4263 for final inspection when project is complete.