CITY OF WAUSAU SIGN ZONING CERTIFICATE AND PERMIT

Department of Inspection and Electrical Systems
407 Grant Street, Wausau, Wisconsin 54403–4783
(715) 261-6780 / fax (715) 261-4102

PERMIT NO.

The purpose of this application form is to enable the applicant to present all pertinent information with reference to a proposed use of land or structures, and to determine if the proposals comply with the zoning and building regulations of the City of Wausau.

1. Owner/Tenant_____ Telephone_____
2. Assessors Key No._____ Zoning District_____
3. Address of Property_____ Lot Frontage _____
4. Contractor_____ Telephone_____
5. Contractor's Address_____
6. Sign Information: Manufacturer_____ Testing Lab Listed_____

☐ New Sign Installation ☐ Expansion ☐ Remodel Other_____

☐ Metal ☐ Glass ☐ Wood ☐ Aluminum ☐ Brick ☐ Plastic

Contents_____

_____

Sign Information	Existing Sign(s)				Proposed Sign(s)			
No. of Signs								
Area in Square Feet								
Height — Top of Sign								
Set Back From Property								
Size of Letters								
Notes:	Lighted	☐	Non-Lighted	☐	Lighted	☐	Non-Lighted	☐
	Flashing	☐	Non-Flashing	☐	Flashing	☐	Non-Flashing	☐
	Projecting	☐	Flat Against Bldg.		Projecting	☐	Flat Against Bldg.	
	Pole Mount	☐	Roof Mount	☐	Pole Mount	☐	Roof Mount	☐
	Double Face		☐		Double Face		☐	
	Awning	☐	Canopy	☐	Awning	☐	Canopy	☐
	Painted	☐	Lettered	☐	Painted	☐	Lettered	☐
			Channel Letter	☐			Channel Letter	☐
Cost of Sign(s) and Installation					$			
Permit Fee					$			

7. I hereby certify that the statements in this application are true and complete to the best of my knowledge and belief and that I, as owner, tenant, or general contractor, agree to build in conformance with the Wausau Zoning Ordinance and Building Code.

_____ _____ _____

Date ☐ Owner ☐ Contractor City Official