## Village of Lake Nebagamon

715-374-3101 (fax) 715-374-3728



P.O. Box 517, 11596 E Waterfront Dr Lake Nebagamon, WI 54849

## **APPLICATION FOR SIGN PERMIT**

TO WHOM IT MAY CONCERN: The undersigned hereby applies for a permit to do work herein described in this application. The undersigned agrees that all work will be done in accordance with the Lake Nebagamon Zoning, Shore Land Zoning, Subdivision Control, Floodplain Ordinances and with all laws of the State of Wisconsin applicable to said premises.

Do not start any construction or installation until a SIGN PERMIT is issued and DIGGERS HOTLINE has marked your lot. Failure to obtain the necessary permits may result in a double permit fee and/or citation.

- > The applicant agrees to comply with all applicable codes, statutes and ordinances and with the conditions of this permit; understands that the issuance of the permit creates no legal liability, expressed or implied, on the Village Agent/Inspector, Department or Municipality; and certifies that all the above information is true and accurate.
- Approval or disapproval of plans shall be based upon review of written and graphic information submitted.
- > Changes made during construction shall be based upon approved revisions to plans
- > Any change in the conditionally approved plans shall be approved by the Village of Lake Nebagamon before said changes are implemented.
- Any variance from work indicated on approved or revised approved plans is done at the sole risk of the owner.
- > It is expressly understood by the project owner(s) and/or contractor(s) that by issuance of this permit any Village Agent/inspector shall be allowed to inspect at reasonable times any permitted work through the final inspection.
- > Failure to allow access to the premises for such inspection(s) shall result in revocation of this permit.
- > If other than a garage or accessory building, two (2) sets of plans that show all rooms, dimensions, elevations and roof overhangs are required before a building permit can be issued. One (1) set will be returned to owner.

## This is a permit application only, not a permit to proceed.

Property Owner's Name:		<del></del>		
Address, City, State & Zip:				
Telephone #:	Date Submitted: _	ubmitted:		
Property Address:				
<b>PROPERTY DESCRIPTION: (Only ne</b> property description, state lot number, locopied from your tax notice or deed.)				
Legal Description:	Cub division Name	,	Section #	
Lot # Block Town# Range#	- -		Section #	
By signing this application, I g Zoning Staff and allow photo I/we understand that failure t	graphs to be taken if neces	sary. I/we agree to m		
Signature of owner or agent:			_ Date:	
Agent's address & phone number	er:			
Adjoining Property Owners Names	& Addresses:			

## **SIGN PERMIT**

DESCRIPTION -							
	On Premises	_ Off Premise	es				
	Free Standing Sign – (Dra		n and show sign loca ings)				
	On Building Sign – (Draw	a sketch of	sign on building)				
				10.1.6			
Work mus	st be completed within 6 mon	iths of approv	al, or extension must t	oe applied for.			
FOR VILL	AGE USE						
			Not Approved				
Date							
Permit #	Fe	ee Paid \$					