

City of Portage  
115 W Pleasant Street  
Portage, WI 53901  
(608)742-2176 Phone  
(608)742-8623 Fax  
Revised: 8/1/2019

Fee: \$132.00 Ground Permit  
Plus Electrical Permit if Required  
Date:  
Receipt #  
Receipting Code: 1201  
Permit #

## APPLICATION FOR SIGN PERMIT

Application is hereby made for a permit to erect/rebuild or alter a sign in conformity with the Ordinances of the City of Portage, upon the property designated below in the manner described herein:

Owner Name: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_

Address of Proposed Sign: \_\_\_\_\_

Contractor Installing Sign: \_\_\_\_\_ Contractor Phone #: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Zoning of Property: \_\_\_\_\_ Responsible Party Email: \_\_\_\_\_

A sketch illustrating the size, shape and message of every proposed sign must accompany this application. A site plan drawing showing the positioning of the sign with respect to the highway, height above the grade, setbacks, buildings, and/or respect to other signs on the premise must accompany this application. Current photos of building site are encouraged.

Type & Number of Proposed Signs:

Wall Sign \_\_\_\_\_ Free Standing/Ground Sign \_\_\_\_\_ Projecting Sign \_\_\_\_\_ Window \_\_\_\_\_

Signs Other: \_\_\_\_\_ (see descriptions in the ordinance)

Dimensions: Height \_\_\_\_\_ x Width \_\_\_\_\_ Totally Square Feet: \_\_\_\_\_ (wall sign depth)

Single Faced or Double Faced (circle) Type of lighting: \_\_\_\_\_

Value: \$ \_\_\_\_\_

This permit is valid for one year from the date of issue if the sign is not constructed. Construction of the sign must be completed within 60 days of the commencement on construction.

CERTIFICATE OF APPLICANT: I hereby certify that the above application is a true and correct statement of the work to be done; that any changes shall be submitted for approval and that the sign shall conform to all City of Portage Ordinances and State Codes where such may apply.

Owner/Agent: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ OFFICE USE ONLY \_\_\_\_\_

Compliant Non-Compliant Fee Received: \$ \_\_\_\_\_

Building Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Administrator: \_\_\_\_\_ Date: \_\_\_\_\_