

MELSTROM INSPECTIONS, LLC

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Sign Application

****Complete the information below as it pertains to this project. On the back of this application, a site plan is required indicating a North directional arrow, property lines, street(s), buildings, proposed sign location, and distances to property lines and street(s).**

| | | | |
|--|-------------------------|--------------------------------|---------------|
| Site Address where Sign is to be Installed | | Municipality | |
| Owner's Name | Owners Daytime Phone | What is the property zoned as? | |
| Owner's Mailing Address | | Owners Email | |
| Applicant's Name (If different than owner) | Applicant Daytime Phone | | |
| Applicant's Mailing Address | | Applicant's Email | |
| General Contractor | Contact Name | Daytime Phone | |
| Mailing Address | | Email | |
| Electrical Contractor | Contact Name | Daytime Phone | WI Credential |
| Mailing Address | | Email | |
| Master Electrician | Email | Daytime Phone | WI Credential |
| Sign install Description: | | | |
| | | | |
| What will the sign display. Include text and/or description of images. | | | |
| | | | |

| | | | |
|--|--|---|---|
| The sign will be: <input type="checkbox"/> Ground mounted <input type="checkbox"/> Pole mounted <input type="checkbox"/> Mounted to a building | The sign will be: <input type="checkbox"/> Internally illuminated <input type="checkbox"/> Externally illuminated <input type="checkbox"/> Will have no illumination | This install is a : <input type="checkbox"/> New Install <input type="checkbox"/> Repair/Replace <input type="checkbox"/> Modify Existing <input type="checkbox"/> Temporary | The dimensions of the sign are Width _____ Length _____ Thickness _____ Sq. Foot _____ Max Height off of Ground _____ |
|--|--|---|---|

| | |
|----------------|---|
| Project Value: | ***Project value includes both materials and labor that is involved in the project. |
|----------------|---|

I understand that I am subject to all applicable codes, laws, statutes, and ordinances, or any additional contingencies as part of this permit; I am subject to any conditions of this permit; I understand that the issuance of this permit creates no legal liability, express or implied, on the state, municipality, building inspector, and/or the inspectors authorized agent; I understand that it is my responsibility to construct and install the sign within the requirements of any municipal ordinances, including setbacks. I certify that all the above information is accurate.

SIGNATURE OF APPLICANT _____

DATE _____