



CITY OF OSSEO

13712 – 8TH Street
P O Box 308

Osseo, Wisconsin
cityofosseo@triwest.net

Phone (715) 597-2207
Fax (715) 597-2600

PERMANENT SIGN PERMIT APPLICATION

Project Address _____

The following items must be completed and submitted as a packet:

1. _____ Sign permit application.
2. _____ One (1) drawing or photo of proposed sign.
3. _____ One (1) drawing or photo denoting location of proposed sign on building wall surface (for all wall signs). Include a scaled or dimensioned building elevation.
4. _____ One (1) site plan denoting location of proposed sign and setbacks from property lines (for all ground signs). Also required for existing ground signs with face changes only.
5. _____ Prior to submitting this sign permit application packet, a business occupancy application must be submitted and approved (for all new businesses or businesses relocating to another location).

Please Note:

The billing notices for the sign and electrical permits will be sent to the sign contractor.

After Approval/ Processing of this Sign Permit Application:

If you do not intend to proceed with this project, please contact our office at 715-597-2207 to avoid paying the entire cost of the permit. Processing fees will be charged. Any/all unpaid permit fees, along with an additional \$50.00 Administrative fee, will be processed as a special charge against the real estate upon which the service was performed.



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APPLICATION FOR SIGN PERMIT
Form # CU125a (rev. 09/19)

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

Project Address _____ Suite number _____

Project Name _____

Contractor _____

Mailing Address _____

City _____ State _____ Zip _____ City _____

State _____ Zip _____

Phone (_____) _____

→ Estimated Cost _____ Contractor's e-mail address _____

Sign Type: Wall _____ Pole/Ground Mounted _____ Monument _____ Projecting _____ Wall
Banner _____

Unified Business Center Sign _____ Canopy/Awning _____ (If Canopy/Awning
category is checked, a

Canopy/Awning Permit application is required with this Sign Application

Size*: _____ by _____ Sq. Ft. _____ Identical

Sign Faces _____

*calculate total surface area for monument signs, including base

Setbacks (required for new or existing ground signs): Front _____ Rear _____ Left _____

Right _____

Sign Height _____ Is this a Cabinet Lens/Face change only? Yes _____ No _____

Is the proposed sign illuminated? Yes _____ No _____

If yes, will new sign connections be installed? Yes _____ No _____ If yes, attached page must
be signed by a State of

Wisconsin licensed electrician.

List all existing wall and/or freestanding signs on subject property:

I agree to comply with all applicable codes, statutes, and ordinances, and with the conditions of this permit; I understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and, certify that all of the permit information herein 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.

Property Owner's Signature
(required) _____ Date _____

Please Print Name _____

Licensee's Signature (required) _____ Date _____

Please Print Name _____

DESCRIPTION FEE QUANTITY

SIGN MINIMUM FEE \$ 25.00 Ea. _____