



## TOWN OF LAWRENCE SIGN REVIEW APPLICATION FOR PLANNING AND ZONING

### GENERAL INFORMATION

<b>Purpose:</b>	The purpose of this article is to promote and protect the public safety, comfort, convenience and general welfare by the orderly placement and erection of signs and billboards in the Town of Lawrence, Brown County, Wisconsin.
<b>Fee:</b>	\$75.00
<b>Meeting Dates/Times:</b>	Meetings of the Planning and Zoning Board occur the second Wednesday of each month at the Lawrence Town Hall, 2400 Shady Ct., De Pere, WI 54115 at 6:00pm.
<b>Application/Information Submittal:</b>	A completed application along with appropriate fee must be submitted to the Town's Business Office. One <b>(1) complete copy</b> of the information being presented to the Board must be included with the application along with a .pdf copy via email. A representative is required to attend and present the information at the meeting.
<b>Ordinance:</b>	<u>§ 300-144 Zoning Article XVII Sign Regulations</u>

READ ALL INSTRUCTIONS PROVIDED BEFORE COMPLETING. IF ADDITIONAL SPACE IS NEEDED, ATTACH ADDITIONAL PAGES.

### SECTION 1: APPLICANT INFORMATION

Applicant Name:		
Mailing Address:		
City:	State:	ZIP Code:
Email:		
Phone Number:		

### SECTION 2: LANDOWNER/DEVELOPER INFORMATION *(IF DIFFERENT FROM APPLICANT)*

Owner/Developer Name:		
Mailing Address:		Email:
City:	State:	ZIP Code:
Email:		
Phone number:		

### SECTION 3: PROJECT OR SITE LOCATION

Project Address:	Parcel #(s):
Parcel Size:	
Current Zoning District:	Frontage:

Legal Description:



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### SECTION 4: SIGN INFORMATION

Describe Purposed Plan:

Prepare and submit an electronic copy of the sign plan detailing your request completely and any additional information which will support your application.

Signature of Applicant:

Date:



### \*\*\*FOR OFFICE USE ONLY\*\*\* APPLICATION/PAYMENT RECEIVED BY

Name: \_\_\_\_\_

Check # \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Date: \_\_\_\_\_ Meeting Date: \_\_\_\_\_

District: \_\_\_\_\_ Zoning: \_\_\_\_\_

Permit #:

Parcel #:



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2400 Shady Court \* De Pere, WI 54115 \* Phone: (920) 336-9131 \* Fax: (920) 336-9193

### **Sign Review Flowchart**

