



REVOCABLE OCCUPANCY / STREET PRIVILEGE PERMIT APPLICATION

City of La Crosse Engineering Department

Phone: 608-789-7505 Email: engineering@cityoflacrosse.org <http://cityoflacrosse.org>

Encroachment Owner: Big Al's Properties, LLC
Address: 115 3rd St. So City: LaCrosse State: WI Zip: 54601
Phone # 608-319-5353 Email Address ryan5533@hotmail.com

Application Preparer (if different from above) Highway 35 Signs LLC
Relationship with Owner: Vendor
Phone # 608-779-9411 Email Address info@highway35signs.com

Description of Proposed Encroachment: SIGN ATTACHED TO BUILDING

Encroachment Address(es): 115 Third St. So.

Benefiting Tax Parcel ID #(s): 17-20017-40

I certify that I have reviewed the Municipal Code and understand all that is related to this permit request. I further certify that I have the full authority to make the foregoing application; the information in the application and the required submittals are complete and correct; the Work or Use performed shall comply with all the laws of the State of Wisconsin, and all ordinances, rules, regulations, policies and special conditions of the City of La Crosse. The applicant agrees to perform the work covered by an approved permit with diligence and convenience to the public.

Signature of Owner or designee: Ryan Johnson Date: 4-4-19
Print Name and Title: Ryan Johnson - Owner

Please return this completed application along with required information and fees noted on checklist below to: City of La Crosse, Engineering Department, 400 La Crosse Street, La Crosse, WI 54601. You will then be given notice of when your request will be on the Board of Public Works agenda for consideration. Once approved an agreement document will be drafted by City and sent to Owner for signatures. Permit will then be valid once recorded with the County's Register of Deeds department. Applicant shall obtain all other necessary permits as required by City Departments. **Average completion time for validation 45 days.**

BELOW THIS LINE TO BE COMPLETED BY CITY STAFF ONLY

Required items to be provided by Applicant:

Scale Drawing of encroachment on letter size paper(s)

Legal Description of benefiting parcel(s) *- emailed deed*

Certificate of Insurance (City as additional Insured)

Initial Application Fee \$ 100.00

Annual Permit Fee \$ _____

Board of Public Works

Approval Date:

Encroachment Type:

Permit Number:

All Fees are Non-Refundable & Subject to change by City Council