



BUILDING PERMIT APPLICATION

Building and Inspections • Phone: (608) 789-7530 • Fax: (608) 789-7589
400 La Crosse St. La Crosse, WI 54601
http://www.cityoflacrosse.org Inspection@cityoflacrosse.org

Application No:
Date:
Parcel No.:

OWNER	Name: Inland Label & Marketing			
	Address:			
	City:		State:	
	Phone:		Cell:	Fax:
	Zip Code:		Email:	

CONTRACTOR	Name: La Crosse Sign Company			Supervisor:
	Address: 1450 Oak Forest Drive			WIS Cred/Qual:
	City: Onalaska		State: WI	Zip Code: 54650
	Phone: 608-781-1450		Cell:	Fax:
	Email:			

PROJECT	Project Address: 3205 Airport Rd, La Crosse, WI 54603			
	Building <input type="checkbox"/>	Addition <input type="checkbox"/>	Alteration/Remodel <input type="checkbox"/>	Cost of Project: \$3,570.00
	Sign <input checked="" type="checkbox"/>	Demolition <input type="checkbox"/>	Intended Use of Land after demolition:	
	Description of Work:			
	Install (1) one 4' x 8' non illuminated wall sign. Install (1) one 6' x 12' non illuminated wall sign.			

PROPERTY	Zoning:		Flood Plain: <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Number of Dwelling Units:		Fire Limits: <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Property located in archaeological district: <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Tenant/Occupancy:		Former Tenant/Occupant:	
	Architect/Engineer Name:		Architect/Engineer Phone:	

INSPECTION USE ONLY	OK TO ISSUE:	Inspector Initials:	It is hereby agreed between the applicant, as owner, owner's agent or servant, and the City of La Crosse that for and in consideration for the premises and of the permit to construct, erect, alter, move, raze, or install and the occupancy of a building or property as above described, to be issued and granted by the Department of Building and Inspections of the City of La Crosse, that the work thereon will be done in accordance with the descriptions set forth in this statement, and as more fully described in the specifications and plans herewith filed; and it is further agreed to construct, erect, alter, move, raze or install and occupy in strict compliance with the ordinances of the City of La Crosse, and to obey any and all lawful orders of the Department of Building and Inspections of the City of La Crosse and State of Wisconsin laws relating to the construction, alteration, repairs, removal and safety buildings and other structures and permanent building equipment.	
	Approval Date:			
	Fees			
	Copies:	\$		
	Plan Review:	\$		
	Permit Fee:	\$		
	Record Maintenance Fee:	\$		
	Other:	\$		
	TOTAL	\$		
	Received By:			
Check #:				

PLEASE MAKE CHECKS PAYABLE TO: CITY OF LACROSSE TREASURER

Hannah Haggerty 9/16/15 *Hannah Haggerty 9/16/15*
 (SIGN) AGENT/CONTRACTOR NAME DATE (PRINT) AGENT/CONTRACTOR NAME DATE

 (PRINT) OWNER NAME DATE (SIGN) OWNER NAME DATE

**DO NOT CONCEAL ANY WORK WITHOUT FIRST RECEIVING INSPECTOR APPROVAL.
 IT IS THE OWNER S RESPONSIBILITY TO SEE THAT INSPECTION REQUESTS ARE CALL IN TO INSPECTOR.**

Aluminum Wall Plaques Group: F



Approved by: _____

Date: _____

Landlord: _____

Date: _____

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DESIGN

SALES

FILE

COLOR KEY



MAKE A STATEMENT!

1450 Oak Forest Drive • Orlando, WI 54650 • 808-281-1450
 2242 Mustang Way • Madison, WI 53718 • 608-222-9333
 2502 Meiby Street • Eau Claire, WI 54703 • 715-835-6189

Drawing by: Chris Clark
 Sign Type: Wall Plaques
 Date Created: 7-13-2015
 Last Modified: 8-5-2015
 Scale: 1/8"=1'

Job Name: Inland Packaging
 Job Address: Airport Rd.
 Salesperson: Brian Faught
 Job Number: 85871

Revision Number: 2
 Job File Location:
 S:\Inland Label & Marketing
 Services\AIRPORT WEST
 BUILDING\85871 Non-Illuminated
 Signs - Airport West Building\Design

PMS 296 C
 White
 PMS 423 C

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Aluminum Wall Plaques Group: E



Approved by: _____ Date: _____

Date: _____ Landlord: _____

Date: _____

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- 1 PMS 295 C
- 2 White
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- 4
- 5

GROUP 001 OF 01 INLAND ONALASKA, WI 54650