

REVOCABLE OCCUPANCY / STREET PRIVILEGE PERMIT APPLICATION

City of La Crosse Engineering Department

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

Property Owner: 320 Pearl LLC			
Address: 2604 31st Ct S City: 1	La Crosse S	tate: WI	Zip: 54601
Phone # 608 385 - 4505	Email Address	ialberty	alive.com
1 Holle #		7	
Application Preparer (if different from above)	La Crosse Si	gn Group	
Relationship with Owner: Sign Contractor			
Phone # <u>608-781-1450</u> E	Email Address	jon.mattson@	Dlacrossesign.com
Description of Proposed Encroachment:			
Projecting blade sign, sign is approximately 30" to	all x 84" wide,		
Encroachment Address(es): 320 Pearl St, La	Crosse, WI		
Benefiting Tax Parcel ID #(s): 17-20032-40			
I certify that I have reviewed the Municipal Code and understa have the full authority to make the foregoing application; the in complete and correct; the Work or Use performed shall comply rules, regulations, policies and special conditions of the City of an approved permit with diligence and convenience to the pub	nformation in the a y with all the laws f La Crosse. The a clic.	pplication and the of the State of Wapplicant agrees to the state of t	e required submittals are lisconsin, and all ordinances, to perform the work covered by
Signature of Owner: 400 anhus Print Name and Title: 320 Peace Like) Andrew	Date: fosspand/V	3/1/22
Please return this completed application along with required in Engineering Department, 400 La Crosse Street, La Crosse, W on the Board of Public Works agenda for consideration. Once to Owner for signatures. Permit will then be valid once recorde obtain all other necessary permits as required by City Department.	nformation and fee /I 54601. You will to approved an agreed with the County	s noted on check then be given not ement document 's Register of Dec	clist below to: City of La Crosse, ice of when your request will be will be drafted by City and sent eds department. Applicant shall
BELOW THIS LINE TO BE CO	MPLETED BY	CITY STAFF	ONLY
D 111 to be an added for Applicants		1 Pa	pard of Public Works
Required items to be provided by Applicant:			
Scale Drawing of encroachment on letter size paper(s)	\times		Approval Date:
Legal Description of benefiting parcel(s)	X	E	ncroachment Type:
Certificate of Insurance (City as additional Insured)	X		SIGN
Initial Application / Annual Fee \$_100,00	X		Permit Number:
City Utility Potential Conflict Notification and Sign-Off			
All Fees are Non-Refundable & Subject to change by C	ity Council	J	