



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: Great Outdoors LLC
Address: 219 Pearl St. City: La C State: WI Zip: 54601
Phone # 608 833-2913 Email Address Kindtawni@gmail.com

Application Preparer (if different from above) Chunyan Yang
Relationship with Owner: tenant
Phone # 605 941 4219 Email Address yanziaa1965@yahoo.com

Description of Proposed Encroachment:
3 foot diameter aluminum composite material round business sign to be hung from existing sign post extending over sidewalk by 3 1/2"

Encroachment Address(es): 219 PEARL ST, La Crosse, WI 54601

Benefiting Tax Parcel ID #(s): 17-20015-050

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: Great Outdoors LLC Date: 6/18/19
Print Name and Title: Jawni Kind, Tawni Kind

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)
 - Certificate of Insurance (City as additional Insured)
 - Initial Application / Annual Fee \$ _____
 - City Utility Potential Conflict Notification and Sign-Off

Board of Public Works
Approval Date:
Encroachment Type:
<u>ON-Premise SIGN</u>
Permit Number:

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



usbar

OPEN

MASSAGE

219

18'

14' 11"

217

MASSAGE



The West 19 feet of Lot 6 and the South 10 feet of the West 19 feet of Lot 7 in Block 20, Original Plat of the Town of La Crosse, in the City of La Crosse, La Crosse County, Wisconsin.

Subject to Easements or claims of easements not shown by the public records.

Subject to an Annual Parking District Assessment of \$200.00 on the 1992 tax roll.

Parcel No. 17-20015-050