

Owner Last Name _____
 First Name _____
 Property Desc. _____
 Tax Parcel # _____
 Town _____
 Number of acres _____
 Subdiv. _____
 Block _____
 E Lot _____
 N, R _____
 T _____
 1/4, Sec. _____
 1/4 _____
 GL _____

Fee: \$ _____ Receipt Number: _____ Permit Number: _____

TOWN OF PINE RIVER LAND USE APPLICATION

To the Zoning Administrator: The undersigned hereby makes application for a Land Use Permit for the work described and located as shown herein. The undersigned agrees that all work shall be done in accordance with the requirements of the Town of Pine River Zoning Ordinances, with all other applicable County Ordinances, and the laws and regulations of the State of Wisconsin. I declare that the information that I am supplying is true and accurate to the best of my knowledge and I acknowledge this information will be relied upon for the issuance of this permit. By signing this application, I am also granting permission to the Zoning Administrator to enter my property at any reasonable time for the purpose of inspection to assure compliance with the zoning laws related to the issuance of this permit.

Zoning Designation: _____

Town Road or Highway (name): _____

Business & Sign Wording: _____

Sign Distance to: right-of-way: _____ ft intersection: _____ ft nearest sign: _____ ft

note: No sign may be located on the road or highway right-of-way

Sign Size: _____ ft high X _____ ft wide = _____ square feet

Property Owner:

Name: _____ Address: _____

Daytime Phone: _____

Signature: _____

Applicant, if different from property owner:

Name: _____ Address: _____

Daytime Phone: _____

Signature: _____

Complete a plot plan drawing on the back of this sheet showing where the sign will be located and a sketch of the proposed sign.

Place a stake on the site where the sign will be located indicating the point nearest to the road. It must be staked and flagged prior to the Zoning Administrator's on-site visit or the issuance of the permit will be delayed.

No construction shall begin until a sign permit has been issued.

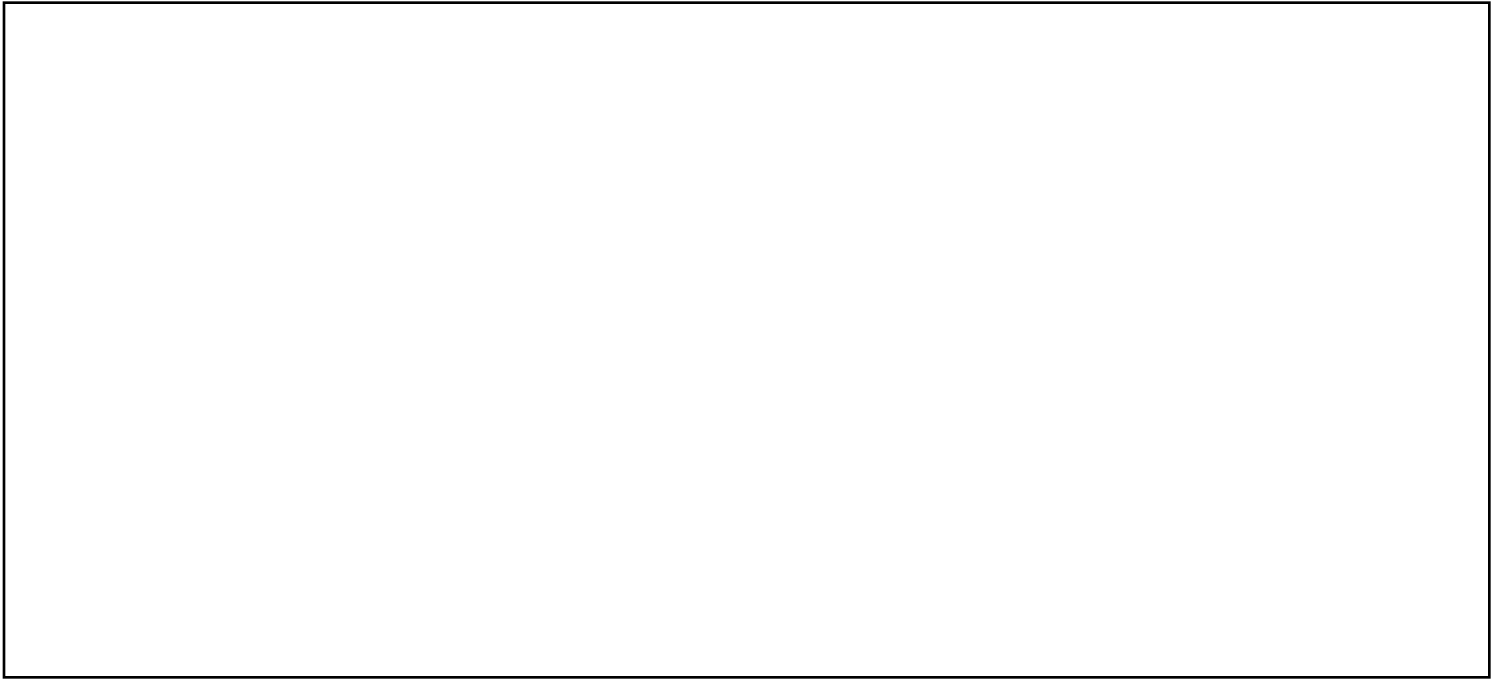
NOTICE: SIGN PERMIT EXPIRES TWO (2) YEARS FROM THE DATE ISSUED.

ACTION: _____ FOR OFFICE USE ONLY
 Date Permit Issued: _____ Signed: _____
 Date Permit Denied: _____ Reason: _____
 Comments or Conditions: _____

SIGN PLACEMENT PLOT PLAN DRAWING

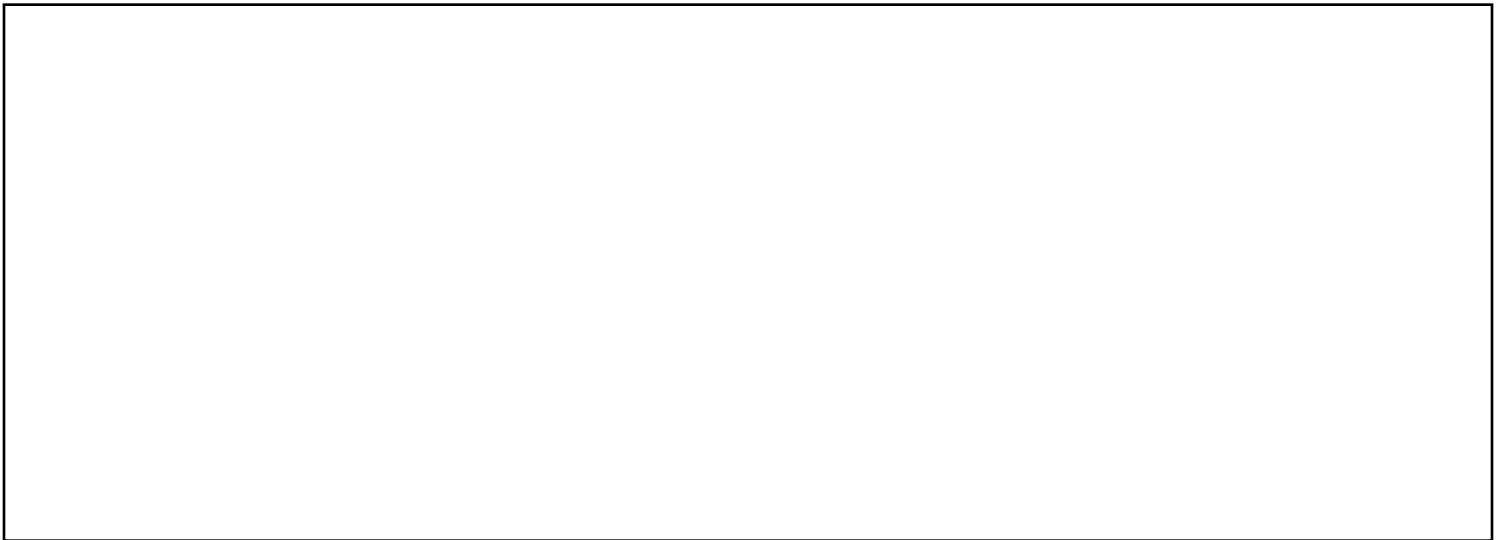
A drawing of the plot MUST be provided. Include ALL of the required information on the drawing. Incomplete applications will be returned.

1. Include the road and/or intersection where the sign will be placed along with the the distance to sign.
2. Show where any driveway or parking area is in relation to the sign's location and indicate the distance to sign.
3. Indicate NORTH.



SIGN SKETCH

A sketch of the proposed sign MUST be provided.



SIGN LOCATION MUST BE STAKED & FLAGGED BEFORE ZONING ADMINISTRATOR'S ON-SITE VISIT, which can occur anytime after this application is submitted. If setbacks cannot be confirmed, it will delay issuing the permit.

FOR OFFICE USE ONLY

Inspection Record: _____

Comments: _____

NO CONSTRUCTION SHALL BEGIN UNTIL A SIGN PERMIT HAS BEEN ISSUED