



Office use only

SIGN PERMIT – SPECIAL EXCEPTION APPLICATION

Purpose: The Sign Permit – Special Exception application is filed when strict adherence to the sign ordinances is prohibitive.

Process: The application is reviewed by the Planning Commission at a regularly scheduled meeting. A public hearing is required. All neighboring property owners within 100 feet of the subject property will be notified of the public hearing and will have an opportunity to voice their concerns or support for the special exception request. After the public hearing, the Planning Commission will make their recommendation to the Village Board. The Village Board, at their discretion, has the authority to approve, deny or table the request.

Filing Fee: \$350 non-refundable fee paid with application

Submission Requirements: Application
Detailed Sign Plans

Due Date: 15th of the month

Meeting Dates: Planning Commission – 1st Monday of every month
Village Board Meeting – 2nd Wednesday of every month

AN INCOMPLETE APPLICATION WILL DELAY REVIEW

CONTACT INFORMATION

Property Owner: _____

Company Name: _____

Mailing Address: _____

City _____ State _____ Zip _____ Phone: _____

Email: _____

Agent Name: _____

Company Name: _____

Mailing Address: _____

City _____ State _____ Zip _____ Phone: _____

Email: _____

PROPERTY INFORMATION

Address of property where signs will be located: _____

Zoning district _____ Tax parcel number _____

List the current number of signs on the property and their locations, if any:

EXPLANATION/NEED FOR SPECIAL EXCEPTION

Explain the need for a sign permit special exception. **Provide details on separate page, photos, plans etc.**

HARDSHIP

Explain what hardships which were not self-created, not a mere inconvenience or financial hardship, will be experienced if a special exception is not granted.

CERTIFICATION

I certify that the information I have provided in this application is true and accurate and I have submitted a **\$350 non-refundable fee** payable to the Village of Baldwin. I understand that there may be additional charges depending on the level of review needed.

Owner/agent signature: _____ Date: _____
(Required)

Contractor signature: _____ Date: _____
(Optional)

REMIT TO:

Village of Baldwin
400 Cedar St. P.O. Box 97
Baldwin, WI 54002
715-684-3426
planning@villageofbaldwin.com