



VILLAGE OF EAST TROY
2015 Energy Drive
East Troy, WI 53120

Sign Inspections
call (262) 352-4433
fax (262) 642-6259

PERMIT NO.
TAX KEY #
Attached with Building Permit #

SIGN Permit Application

PROJECT ADDRESS: 3260 Main Street

PROJECT DESCRIPTION: Wall Sign

☐ Commercial

☐ One and Two Family

APPLICANT OR AGENT Scott Boese	ADDRESS: 2500 S 170th Street	TELEPHONE - INCLUDE AREA CODE 262-784-0500
BUSINESS NAME Bauer Sign and Lighting	MOBILE NUMBER 414-828-6233	FAX NUMBER
EMAIL ADDRESS sboese@bauersignusa.com	SIGNATURE <i>Scott A. Boese</i>	
PROPERTY OWNER Brian Pacholski	ADDRESS: 3260 Main Street	TELEPHONE - INCLUDE AREA CODE 262-762-7077
EMAIL ADDRESS OR FAX NUMBER brian@bayviewshade.com	SIGNATURE <i>Brian Pacholski</i>	

PLEASE FILL OUT THE INFORMATION BELOW REGARDING THE PROPOSED SIGN:

BUSINESS NAME: HOT CARTS OF WI		
LOCATION/ADDRESS: 3260 Main Street		
PHONE NUMBER: 262-762-7077	ZONING DISTRICT:	ESTIMATED COST: \$1,500.00

SIGN TYPE:

☒ Wall	☐ Monument/Free Standing
☐ Marquee/Canopy	☐ Park Name
☐ One Side	☐ Two Sided
☐ Temporary	☐ Other - Specify: _____

SIGN DIMENSIONS:

Sign Face Dimensions	Height: 60"	Width: 96"
Total Display Area: 40	sq ft	Setback from street R.O.W. _____ ft
Distance from grade to peak of sign (ground sign): _____ ft	Lineal feet of wall sign will be placed on(wall sign): 100 ft	

SIGN LIGHTING:

☐ Internally Illuminated	☐ Ground Mounted
☒ Non-Illuminated	☐ Pole Mounted
☐ Mounted On Top of Sign	☐ Other-Specify: _____

EXISTING SIGNS

Number of Signs: 0	Type: _____	Area: _____ sq ft
	Type: _____	Area: _____ sq ft
	Type: _____	Area: _____ sq ft

See Additional Conditions Correspondence

CONDITIONS OF APPROVAL: All signs shall conform to the Village of East Troy Zoning Code. Please call 262-352-4433 for Inspections. Give at least 24 hours notice.

The applicant agrees to comply with the Municipal Ordinances and with the conditions of the permit: understands that the issuance of the permit creates no legal liability, express or implied, of the Department, Municipality, Agency or Inspector; and certifies that all of the above information is accurate. Have permit Application number and address when requesting inspections. Call 262-352-4433. Give at least 24 hours notice on all inspections.

Signature of Applicant

Scott A. Boese

Date **6-19-25**

FEES:	RECEIPT	PERMIT EXPIRATION:	PERMIT ISSUED BY MUNICIPAL AGENT
Permit Fee \$ _____ If you would like a copy of the permit, please send a stamped self addressed envelope.	Date _____ From _____ Rec. By _____	90 Days from date unless otherwise noted below	Name _____ Date _____ Certification# _____

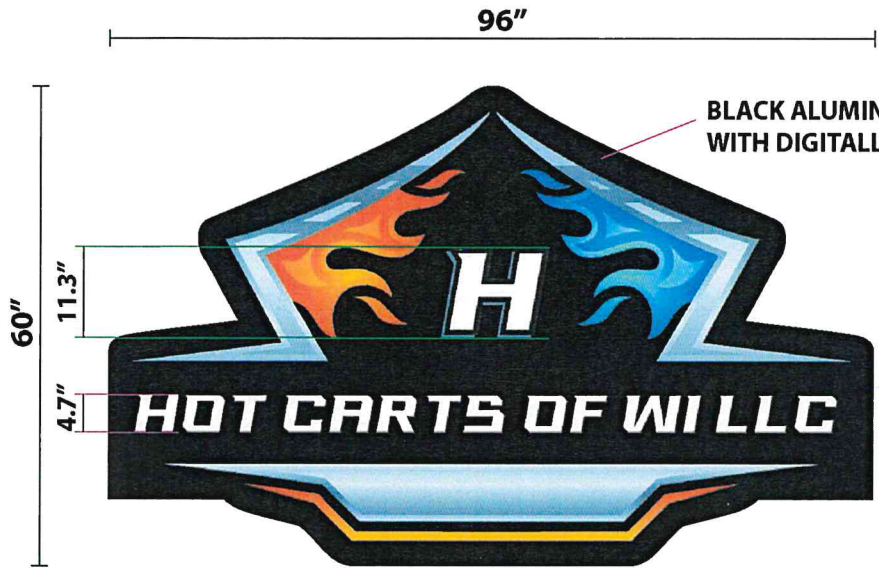
NO REFUNDS ON PERMITS



2500 South 170th
New Berlin, Wisconsin
Proudly Made in the USA!

Web: www.bauersignusa.com
Phone: 262-784-0500
Fax: 262-784-6675

File	Hot Carts
Location	East Troy
Client	
Sales rep	Scott Boese
Date	cb 06/12/25
Revision	



BLACK ALUMINUM PANEL
WITH DIGITALLY PRINTED GRAPHICS

❌ ART PROVIDED IS **NOT** PRODUCTION READY,
CLIENT TO PROVIDE VECTOR ARTWORK OR
CAN BE CLOSELY RE-CREATED BY BAUER SIGN
GRAPHIC ARTIST (MAY INCUR ADDITIONAL
CHARGES DEPENDING ON COMPLEXITY)

OPTION 4

SPECIFICATIONS

FABRICATE AND INSTALL ONE NON-ILLUMINATED ALUMINUM PANEL.

- PANEL TO BE ALUMINUM - BLACK WITH DIGITALLY PRINTED ARTWORK
- NON-ILLUMINATED
- INSTALLED TO FASCIA WITH APPROPRIATE HARDWARE



Printed artwork colors are not always representative of final product colors. Please refer to specifications for call out or salesman for samples.

These drawings are the exclusive property of Bauer Sign Company. Not to be duplicated in any way without expressed written permission!

FINAL ELECTRICAL
CONNECTION IS CLIENT'S
RESPONSIBILITY

our products are certified by:
Underwriters Laboratories, Inc.

This sign shall be manufactured in accordance with
the Article 602 of the National Electrical Code and/or
the applicable local codes. This includes proper
grounding and bonding of the sign. Sign shall bear
correct UL Label.

Scale: 1/2" - 1'