



**CITY OF RACINE**

**General Application Form**

Department of City Development  
730 Washington Ave., Rm. 102  
Racine, WI 53403  
Phone: 262-636-9151  
Fax: 262-635-5347

**Type of Reviews**

- 2035 Comprehensive Plan Amendment (\$0 Fee)
- Administrative Review (\$0 Fee)
- Certified Survey Map (\$170 + \$50 per lot)
- Conditional Use Permits (\$695 Fee)
- Design Review (\$0 Fee)
- Research Request (\$0 Fee)
- Rezoning (\$830 Fee)

✓ APPLICANT NAME: Jalil mian  
 ADDRESS: STREET: 1100 6th St CITY: Racine STATE: WI ZIP: 53403  
 TELEPHONE: 262632 9977 CELL PHONE: \_\_\_\_\_  
 EMAIL: mian@WE-RR.COM

✓ AGENT NAME (IF APPLICABLE): Gary Strohm State-Sign  
 ADDRESS: STREET NS15 Bluff Cliff CITY: Milton STATE: WI ZIP: 53563  
 TELEPHONE: \_\_\_\_\_ CELL PHONE: 920.723.1470  
 EMAIL: Gary@State-Sign.com

✓ PROPERTY ADDRESS (ES): \_\_\_\_\_  
 CURRENT ZONING: B-5  
 CURRENT/MOST RECENT PROPERTY USE: gas station  
 PROPOSED USE: \_\_\_\_\_  
 PROPOSED ZONING (only if applicable): \_\_\_\_\_  
 LEGAL DESCRIPTION AND TAXKEY (only required for CSM, Rezoning and Comprehensive Plan Amendments): \_\_\_\_\_  
 CURRENT COMPREHENSIVE PLAN DESIGNATION: (only for comp plan amendments) \_\_\_\_\_  
 PROPOSED COMPREHENSIVE PLAN DESIGNATION: (only for comp plan amendments) \_\_\_\_\_

✗ Are you the owner of the property included in the area of the requested zoning?  
 Yes     No     Option to Purchase     Lease

\*NOTE: The owner of the property (if different than the applicant) must sign this application.

**OWNER & APPLICANT AUTHORIZATION**

The signature(s) hereby certify that the statements made by myself and constituting part of this application are true and correct. I am fully aware that any misrepresentation of any information on this application may be grounds for denial of this application. I agree that if this request is approved, it is issued on the representations made in this submittal, and any approval or subsequently issued building permit(s) or other type of permit(s) may be revoked without notice if there is a breach of representation or conditions of approval. The applicant/owner by their signature understands and agrees that they are responsible for the completion of all on-site and off-site improvements as shown and approved on the final plan:

✗ Owner (s) Signature: Jalil mian Date 8-16-18  
 Print Name: Jalil mian

✗ Applicant (s) Signature: Gary Strohm Date 8-16-18  
 Print Name: GARY STROHM





**CITY OF RACINE**

**CHECK LIST FOR DESIGN REVIEW**

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- Douglas Avenue
- Downtown
- Olsen Industrial Park

- Redevelopment Area
- State Street
- Uptown

- West Racine
- Young Industrial Park

**BUSINESS REPRESENTATIVE** Gary Stohm

**BUSINESS NAME:** State-Sign

**BUSINESS ADDRESS:** NSIC Blue Hawk Bldg R2 CITY: Wilton STATE: WI ZIP: 53563

**TELEPHONE:** \_\_\_\_\_ CELL PHONE: 920.723.1470

**EMAIL:** Gary@State-Sign.com

**SUBMITTAL REQUIREMENTS**

- Cover Letter with brief description of project.
- Plans displaying the following information:
  - Name of development or project
  - Developer's and/or owner's name, address, phone number, facsimile number.
  - Name of person and/or firm preparing plans along with address, phone number, facsimile number.
  - The most current date of preparation/revision

**If the project is for a Sign, Submit...**

- Sign plan drawn to scale showing the design, materials, height, size, location, illumination method, method of installation and number of signs.
- Perpendicular color photo of your building, the buildings on each side of your building, and the buildings across the street.
- Dimensioned color rendering or digitally enhanced color photo of the proposed signage as it will appear when installed.
- Materials samples sign lens, color chips, base materials, anchoring devices (photos or spec. sheets are acceptable).

**If your project includes awnings or canopies, Submit...**

- A plan drawn to scale showing dimensions of projection, drop, valances, height above sidewalk, distance to curb.
- Perpendicular color photo of your building, the buildings on each side of your building, and the buildings across the street.
- Dimensioned color rendering or digitally enhanced color photo of the proposed awning as it will appear when installed.
- Materials samples of awning materials, support structures, anchoring devices (spec. sheets are acceptable), color chips, etc.

**If your project is an exterior remodeling or façade restoration, Submit...**

- Architectural treatment of all building exteriors and include materials samples and color chips.
- Roof-top equipment descriptions (submit dimensioned brochures, drawings or photos) if applicable.
- Dimensioned and to-scale building elevations showing materials, textures and colors (include materials samples and color chips).
- Dimensioned and to-scale color rendering of exterior elevations (include color chips) Roof-top equipment descriptions (submit dimensioned brochures, drawings or photos) if applicable.
- Dimensioned and to-scale building elevations showing materials, textures and colors (include materials samples and color chips).

Hometown Square Footage same all 4 sides

14.74 sq<sup>2</sup>

11'

1.34'

HOMETOWN

1.34'



Worth

*West*

**HOMETOWN**



*East*

**HOMETOWN**



**HOMETOWN**



*South*