



## CITY OF RACINE

### CHECK LIST FOR DESIGN REVIEW

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

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Douglas Avenue        | <input type="checkbox"/> Redevelopment Area      | <input type="checkbox"/> West Racine           |
| <input type="checkbox"/> Downtown              | <input checked="" type="checkbox"/> State Street | <input type="checkbox"/> Young Industrial Park |
| <input type="checkbox"/> Olsen Industrial Park | <input type="checkbox"/> Uptown                  |  |

**BUSINESS REPRESENTATIVE** Kat Maisto

**BUSINESS NAME:** Fairwinds Canvas

**BUSINESS ADDRESS:** 1322 State St **CITY:** Racine **STATE:** WI **ZIP:** 53404

**TELEPHONE:** 262-632-5025 **CELL PHONE:** 262-909-2628

**EMAIL:** kat@fairwindscanvas.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).



**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
- |  |  |   |
|--|--|---|
| <input type="checkbox"/> 2035 Comprehensive Plan Amendment (\$0 Fee) | <input type="checkbox"/> Certified Survey Map (\$170 + \$50 per lot) | <input checked="" type="checkbox"/> Design Review (\$0 Fee) |
| <input type="checkbox"/> Administrative Review (\$0 Fee)             | <input type="checkbox"/> Conditional Use Permits (\$695 Fee)         | <input type="checkbox"/> Research Request (\$0 Fee)         |
|  |  | <input type="checkbox"/> Rezoning (\$830 Fee)               |

APPLICANT NAME: Fairwinds Canvas  
ADDRESS: STREET: 1322 State St CITY: Racine STATE: WI ZIP: 53404  
TELEPHONE: 262-632-5025 CELL PHONE: 262-909-2628  
EMAIL: kat@fairwindscanvas.com

AGENT NAME (IF APPLICABLE): Statewide Fencing, Inc  
ADDRESS: STREET: 8310 Industrial Dr CITY: Franksville STATE: WI ZIP: 53126  
TELEPHONE: 262-898-7317 CELL PHONE: 262-620-0150 Rita S.  
EMAIL: rita@statewidefencing.com

PROPERTY ADDRESS (ES): Same as above  
CURRENT ZONING: commercial  
CURRENT/MOST RECENT PROPERTY USE: canvas fabrication  
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: [Signature] Date 10-30-19  
Print Name: KATHARINE J. MELATO  
Applicant (s) Signature: [Signature] Date 10-30-2019  
Print Name: Rita Soens

- ☐ Dimensioned and to-scale color rendering of exterior elevations (include color chips)
- ☐ Dimensioned sign plan drawn to scale showing design, materials, height, size, location, number of, illumination method, etc.(see sign submittal requirements).
- ☐ Dimensioned and to-scale awning or canopy plan (see sign submittal requirements).

**If your project is a building addition or new construction, Submit...**

- ☐ Dimensioned and to-scale plot plan showing:
  1. North arrow and scale.
  2. Location of structure(s) on lot.
  3. Parking and access drive locations, parking stall dimensions, curbing, tire stops, loading docks, lighting, etc.
  4. Trash and utility areas, including design, materials, size, location, access to, screening, etc (include materials samples).
  5. Landscaping showing type, size and placement, fencing, berming, walls, screening, etc.
  6. Outdoor lighting showing direction of beam, intensity, and height and type of fixtures (include spec. sheets or drawings).
  7. Location of all easements.
  8. Surface treatment of all outside areas (i.e. Grass, asphalt, concrete, paver stones, etc.)
  9. Location of sewer and water lines, gas, electric, telephone, etc.
  10. On-site surface water drainage, grading, building ground elevations, and storm drainage systems.
  11. Parking plans showing number of parking spaces and location.
- ☐ Dimensioned and to-scale sign plan showing design, materials, height, size, location, number of, etc. (see sign submittal reqs).
- ☐ Dimensioned and to-scale awning or canopy design (see awning submittal requirements).
- ☐ Dimensioned and to-scale building plans showing design attributes such as:
  1. Architectural treatment of all building exteriors (provide materials samples).
  2. Roof-top equipment (submit dimensioned brochures, drawings or photos).
  3. Exterior building elevations showing materials, textures and colors (provide materials samples and color chips).
  4. Color rendering of exterior elevations of building (provide color chips).
  5. Floor plans.
  6. Entrances, exits, loading docks, storage areas and building service areas.
- ☐ A schedule of project information such as:
  1. Lot area.
  2. Number, density, size and distribution of dwelling units (if applicable).
  3. Total square feet in building(s) by floor.
  4. Zoning of the project site.

**OTHER REQUIRED INFORMATION (If applicable).**

Number of employees; Hours of operation; Truck traffic and size of truck; Description of business, including machinery used, processes involved, products produced, noise and emissions created; Future expansion.

I certify that all items checked above have been provided. I understand that not providing all of this information may result in an incomplete application and delay the consideration of my project for approval.

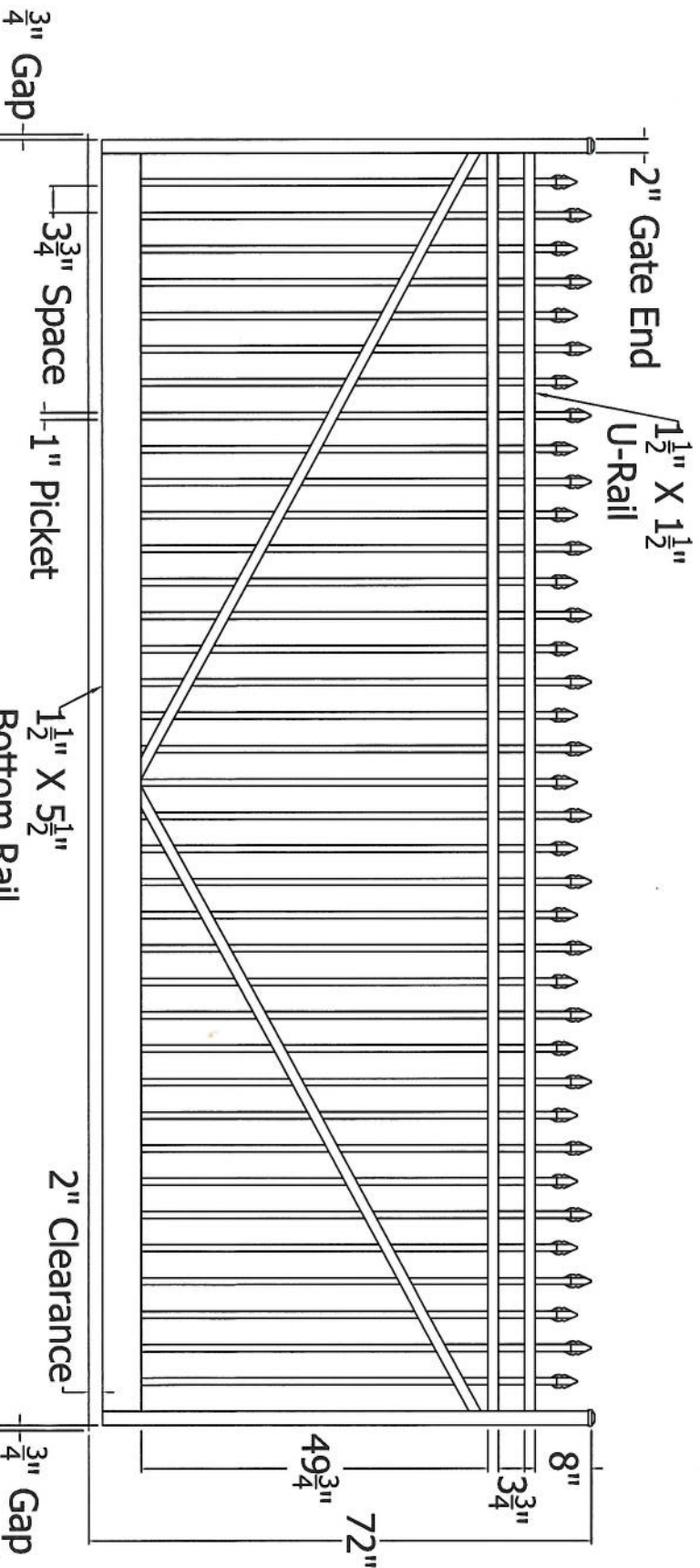
SIGNATURE: \_\_\_\_\_

*Rick & JoAnn*

DATE: \_\_\_\_\_

*10-30-19*

REV.		REVISION		PART NUMBER:	
REV.	LOC.	RELEASE PENDING APPROVAL		DATE	
A					



*Fairwind's Canvas Gate (alum.)*

APPROVED BY:

*\*Black Texture*

DATE APPROVED:

4

3

2

1



3446 US 6 EAST  
Bremen, IN 46506

FINISH:

SHEET SIZE = C	DRAWN BY: EH	PART NUMBER OR STYLE:
SCALE = 1" = 1'	DATE DRAWN: 08-22-2019	2132-S-186W-72T
STANDARD TOLERANCE: .00 ±.01 FRACTIONS:	LOC: U:\ENR\HCAD	Quote requested by: Rita
.000 ±.005 ±.0"	Drawings\2019\2000 SPS\Gate	
ANG. ±.5		
FIRST USED ON:	DRAFT: 20190822-1E	PART NAME: Gate
		SHEET REV. of A

TIME RECEIVED  
October 28, 2019 2:55:29 PM CDT  
Oct/28/2019 2:08:31 PM

REMOTE CSID  
2628330203  
Statewide Fencing, Inc. 2628330203

DURATION  
57  
PAGES  
2

STATUS  
Received

1/2



## City of Racine Building Department

730 Washington Avenue  
Racine, WI 53403  
Phone (262) 636-9464  
FAX (262) 636-9329

1072

### PERMIT APPLICATION

Permit Type Fence/Gate  
Project Address 1322 State Street  
Secondary Address \_\_\_\_\_  
Parcel ID \_\_\_\_\_

Date Issued \_\_\_\_\_  
Permit Status \_\_\_\_\_

Owner Fairwinds Canvas  
Address 1322 State St  
City Racine  
State WI Zip 53404  
Phone 262-632-5025  
E-mail Kat@fairwindscanvas.com

Issued By \_\_\_\_\_  
Contractor Rita Soens 262-620-0150  
Address Statewide Fencing Inc  
8310 Industrial Dr.  
City Franksville  
State WI Zip 53126  
Phone 262-898-7317  
Fax 262-833-0203  
E-mail Rita@statewidefencing.com

Applicant \_\_\_\_\_  
Address Same as above  
City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone / Fax \_\_\_\_\_  
Business Name: \_\_\_\_\_

License No. \_\_\_\_\_  
Expiration Date \_\_\_\_\_  
Project Type Gate replacement  
Permit Value 5294-  
Permit Fee \_\_\_\_\_

Downtown Review Required ☐ Yes ☐ No  
Downtown Review Approved ☐ Yes ☐ No

Conditional Use Required ☐ Yes ☐ No  
Conditional Use Approved ☐ Yes ☐ No  
Resolution No \_\_\_\_\_ Date \_\_\_\_\_

Zoning Board of Appeals Requested ☐ Yes ☐ No  
Zoning Board of Appeals Approved ☐ Yes ☐ No  
Appeal No \_\_\_\_\_  
Bldg Board of Appeals Requested ☐ Yes ☐ No  
Bldg Board of Appeals Approved ☐ Yes ☐ No  
Appeal No \_\_\_\_\_

Comments \_\_\_\_\_

Receipt No. \_\_\_\_\_

PCA \_\_\_\_\_

CensusTract \_\_\_\_\_

FloodPlain ☐

Zoning \_\_\_\_\_

#### Project Description

6' high ornamental  
gate across drive  
west side of building

Name of Business \_\_\_\_\_

Number of Units 0 Area 0 Volume 0 ConstructionType \_\_\_\_\_

TOTAL FEE'S MUST BE ROUNDED UP TO NEXT DOLLAR AMOUNT

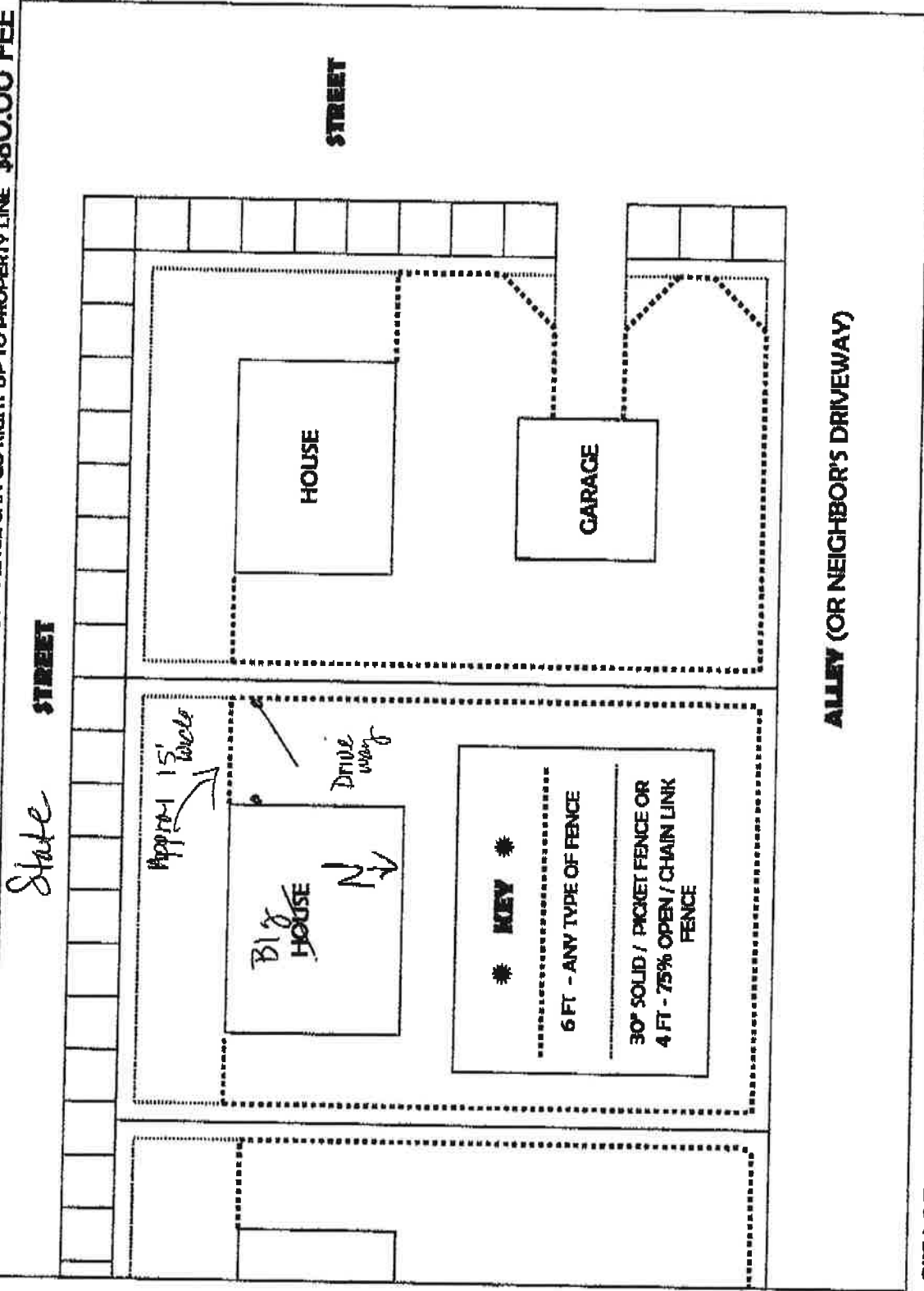


2072

Statewide Fencing, Inc.  
c/o Rita Soen

Fair Winds Canvas  
1322 - State St. Racine, WI

**FENCE RULES & REGULATIONS** FINISHED SIDE FACES OUT-- FENCE CAN GO RIGHT UP TO PROPERTY LINE **\$80.00 FEE**



CITY OF RACINE BUILDING DEPARTMENT \* 730 WASHINGTON AVE ROOM 307 \* PHONE (262) 636-9464