



IOWA COUNTY OFFICE OF PLANNING & DEVELOPMENT

222 N. Iowa Street, Suite 1223  
Dodgeville, WI 53533  
608-935-0333/608-553-7575/fax 608-935-0326  
[Scott.Godfrey@iowacounty.org](mailto:Scott.Godfrey@iowacounty.org)

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**APPLICATION FOR IOWA COUNTY SIGN PERMIT**

Applicant: \_\_\_\_\_ Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
Email: \_\_\_\_\_ Please contact by: \_\_\_email \_\_\_postal mail  
Installer: \_\_\_\_\_ Address: \_\_\_\_\_  
Land Owner: \_\_\_\_\_ Address: \_\_\_\_\_  
Sign Owner: \_\_\_\_\_ Address: \_\_\_\_\_

Location – Town of: \_\_\_\_\_ Section \_\_\_\_ Town \_\_\_\_ N Range \_\_\_\_ E

QTR/QTR \_\_\_\_\_ Along Highway/Road \_\_\_\_\_

Facing: N S E W Direction of Travel: N S E W

Permit Fee is \$150, payable to Iowa County. **(After-the-fact permits 5X normal fee per Section 8.2 of the Iowa County Zoning Ordinance)**

Payable to Iowa County Office of Planning & Development

**\*\*IF THE SIGN IS TO BE ALONG OR VISIBLE FROM A STATE HIGHWAY, APPLICANT MUST CONTACT STATE FOR PERMIT: (608) 242-8019, WDOT**

State Permit Number: \_\_\_\_\_ Issue date: \_\_\_\_\_

PLEASE SKETCH THE DIMENSIONS, DESCRIPTION, & CONTENT OF THE PROPOSED SIGN IN THE BOX ON THE REVERSE SIDE OR ATTACH TO THIS FORM.

Sign Information:

Date of Installation: \_\_\_\_\_

Type: \_\_\_\_\_ Number of faces: \_\_\_\_\_

Face Dimensions: \_\_\_\_\_ X \_\_\_\_\_ Feet off ground: \_\_\_\_\_

Feet from Right of Way: \_\_\_\_\_ Feet to nearest sign: \_\_\_\_\_

Feet to nearest property line: \_\_\_\_\_ Feet to centerline of road: \_\_\_\_\_

In the space below, please sketch the dimensions, contents, and description of the proposed sign. Also, please indicate the proposed location of the sign with distances to property lines, road centerlines, right-of-ways, and existing signs.

**SIGN DIMENSIONS, CONTENTS**

DESCRIPTION τ

LOCATION τ

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You may be required to stake out the proposed sign location at the Planning & Development Director's request.

The signatures below certify that the above information is true and correct to the best of their knowledge.

**\*\*NOTE:** The signature of the property owner/ applicant gives consent for Planning & Development personnel to enter his/her property for the reasons of inspection in relation to this application.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Land Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**OFFICE USE ONLY**

Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Fee received: \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Reasons: \_\_\_\_\_