CITY of BELOIT

PLANNING AND BUILDING SERVICES DIVISION

100 State Street, Beloit, WI 53511 Phone: (608) 364-6700 Fax: (608) 364-6609

ARCHITECTURAL REVIEW APPLICATION

(Please Type or Print)		or Print)	File Number:		
1.	Address	of property:			
		umber:			
				one:	
	(Address)	(City)	(State)	(Zip)	
4.	Applican	t's Name:			
	(Address)		(State)	(Zip)	
	(Office Pho	ne #) (Cell Phone #)	/ (E-mail Addres	s)	
	necessary	ve on existing architectural feat			
6.	Attachments:				
	[] A	current survey map of the project	t area, including a legal descri	iption of the project	
	[] A	site plan which complies with Se	ection 2.6 of the Zoning Code		
	po rej	ailding elevations and drawings a ortray the design concept. Written presentations of sample exterior re cluded.	n manufacturer's literature or	photographic	
		rawings and specifications of any d heights, including illumination		cations, colors, sizes	
		anufacturer's illustrations of exte cluding illumination calculations	5 5	ite and buildings	

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ARCHITECTURAL REVIEW APPLICATION (continued)

6. Attachments (continued):	Attachments (continued):					
[] A landscape plan and a tree protection and preservation plan which comply win Section 34.21 of this chapter						
[] Photographs of adjacent	tes					
	Photographs or graphic representations of other buildings or sites which serve to illustrate the proposed project					
[] Samples of exterior materials proposed for buildings, screenings, and other improvements, showing color, texture and type						
[] A list of exterior materials and specifications for the exterior design features [] The following statistical data, if applicable:						
			 Gross site area 			
Net site areaArea to be dedicated for public rights-of-way						
			• Impervious surface site area	cres, square feet and percentage of total		
 Pervious surface area 	es, square feet and percentage of total site					
The applicant's signature below indicates the information contained in this application and on all accompanying documents is true and correct. Incomplete applications will not be reviewed.						
	/					
(Signature of applicant)	(Print name)	(Date)				
	/	/				
(Signature of owner, if different)	(Print name)	(Date)				
Review fee: \$250.00* for major improvements (i.e. new buildings, additions, parking lots, etc.)						
\$65.00* for minor improvements (i.e. signs, painting) Amount paid: \$						
*Review fees are doubled to \$500.00 and \$130.00, respectively, when work begins prior to issuance of an Architectural Review Certificate.						
Application accepted by:Date:						

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