



buildinginspections@ci.lawrence.ks.us

Date: _____ **Paid:** _____ **Payment received by:** _____



Existing
Marble
Marker

(Depth unknown)
until dug up.

[Estimated depth
8"]

Controlling depth

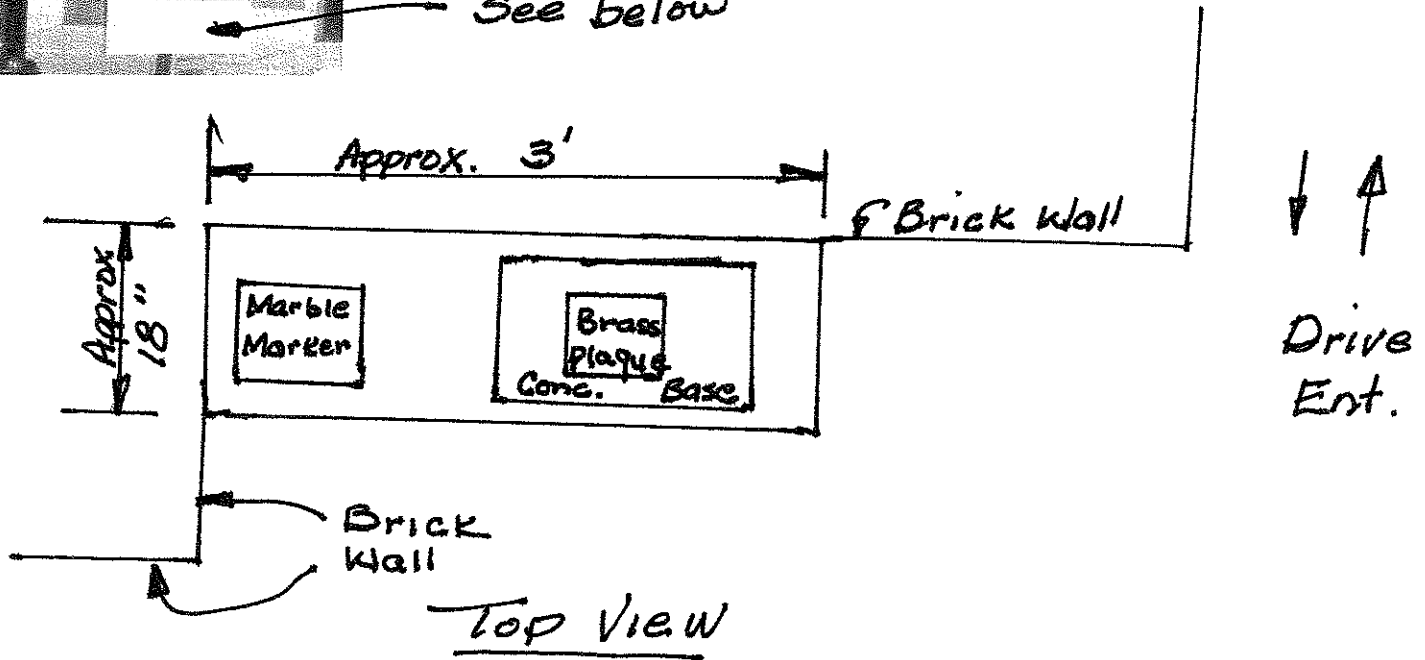
Existing concrete
and brass marker
(Depth unknown)
until dug up

[Estimated depth
4"]



Approx 3' x 5' Alum. sign
Approx 1/2" thick
mounted to wall
with bolts.

See below



Slope to drain
as sidewalk does.

Located on New Hampshire st.
across(w)from art Center.



City of Lawrence

PLANNING & DEVELOPMENT SERVICES

Building Safety Division
1 Riverfront Plaza, Suite 110
PO Box 708
Lawrence, KS 66044
Phone: (785) 832-7700
Fax: (785) 832-3110
www.lawrenceks.org
buildinginspections@ci.lawrence.ks.us

SIGN PERMIT APPLICATION***

Date: 8/25/09

1. Type of sign: ☒ Construct new sign
-OR-
☐ Rework or replace existing sign
2. ☒ Permanent
-OR-
☐ Temporary from: _____ to _____

3. Business Name: Sons of Union Vets. of Civil War

4. Business Address: _____ 5. Zoning of Business _____

6. Sign to be: a. ☐ Ground Sign
b. ☒ Wall Sign
c. ☐ Other: _____
d. ☒ Non-Illuminated / ☐ Illuminated (method) _____

7. Sign to be constructed of: Alum. Covered with UV protection photo.

8. Sign Area (square feet): 15 3' wide x 5' high

9. Wall Area (square feet, wall signs only): 15'

10. Set Back from Property Line: _____

11. Estimated Value: \$300

- ***Required Attachments:
- 12. An overhead site plan
 - 13. A drawing or photograph detail showing sign dimensions
 - 14. An elevation drawing or photo showing sign placement

Please attach these and any other relevant documentation. Fax or email completed application and accompanying plans to the City of Lawrence Development Services Division, (785) 832-3110 or buildinginspections@ci.lawrence.ks.us.

15. Sign Contractor: _____	If electrical work is included on this permit:
16. Sign Contractor License #: _____	19. Electrical Contractor: _____
17. Applicant Name: _____	20. Electrical Contractor License #: _____
18. Phone Number: _____	21. Phone Number: _____

22. Applicant Signature: Robert L. Waver Date: 8/25/09

For Staff Use:
Approved By: _____ Permit Number: _____
Date: _____ Paid: _____ Payment received by: _____



City of Lawrence

PLANNING & DEVELOPMENT SERVICES

Building Safety Division
1 Riverfront Plaza, Suite 110
PO Box 708
Lawrence, KS 66044
Phone: (785) 832-7700
Fax: (785) 832-3110
www.lawrenceks.org
buildinginspections@ci.lawrence.ks.us

SIGN PERMIT APPLICATION***

Date: 8/25/09

1. Type of sign: ☐ Construct new sign
-OR-
☒ Rework or replace existing sign
2. ☒ Permanent
-OR-
☐ Temporary from: _____ to _____

3. Business Name: Sons of Union Vets. of Civil War

4. Business Address: _____ 5. Zoning of Business _____

6. Sign to be: a. ☐ Ground Sign
b. ☐ Wall Sign
c. ☒ Other: Existing marker to be removed from grass area and placed on sidewalk near parking garage.
d. ☒ Non-Illuminated / ☐ Illuminated (method) _____

7. Sign to be constructed of: Marble

8. Sign Area (square feet): 2

9. Wall Area (square feet, wall signs only): _____

10. Set Back from Property Line: _____

11. Estimated Value: \$400

- ***Required Attachments:
- 12. An overhead site plan
 - 13. A drawing or photograph detail showing sign dimensions
 - 14. An elevation drawing or photo showing sign placement

Please attach these and any other relevant documentation. Fax or email completed application and accompanying plans to the City of Lawrence Development Services Division, (785) 832-3110 or buildinginspections@ci.lawrence.ks.us.

15. Sign Contractor: _____	If electrical work is included on this permit:
16. Sign Contractor License #: _____	19. Electrical Contractor: _____
17. Applicant Name: _____	20. Electrical Contractor License #: _____
18. Phone Number: _____	21. Phone Number: _____

22. Applicant Signature: Robert L. Wanda Date: 8/25/09

For Staff Use:
Approved By: _____ Permit Number: _____
Date: _____ Paid: _____ Payment received by: _____

E495

K2. Inf 12

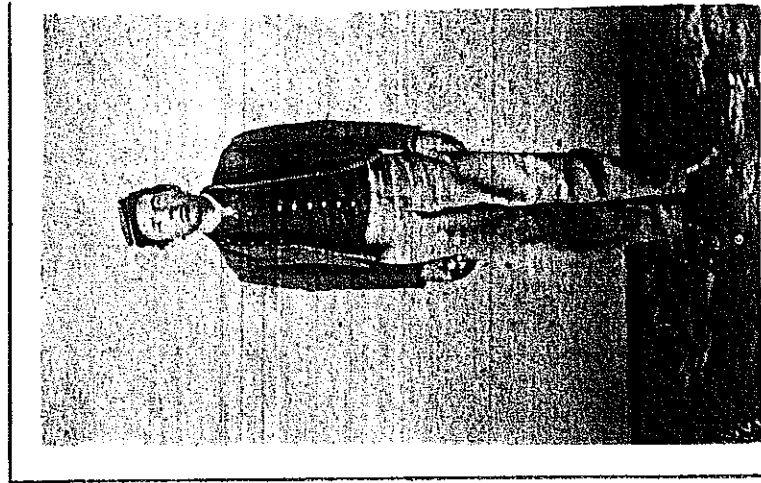
Co F

*11-15

Military - Civil War

Twelfth Kansas Infantry, Company F

*11 Joseph Garrett



ond