

CITY OF BOERNE SIGN VARIANCE REQUEST FORM

Please attach a copy of the rejected application from Code Compliance

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NAME: Klamo Sign Solutions	Ashley Schnedel
ADDRESS: 1731 S. San Marcos St.	BIda 818 SAN 782
PHONE #: 210-239-6777 EMAIL: 086	le 10 alamosign solution
NAME OF BUSINESS AND ADDRESS WHERE PROPOSED	SIGN WILL BE LOCATED:
Methodist Surgery Center	(SION A)
110 Merger Springs	
SECTION / ARTICLE OF ORDINANCE: Section	7 Article F
	4
Please attach any additional information that might assist y drawings, photos, etc.)	your request (i.e. site plan,
Additional Comments (attach if necessary):	
Signature Date	5/19/2020
Attn 447 Boe	t Fee Due: \$115.00 of Boerne : Lori A. Carroll, City Secretary N. Main Street rne, TX 78006 249-9511

City of	i,		
Boe	7	'n	P

SIGN PERMIT APPLICATION

Application date	
Sign approval	

Please print clearly all information. Incomplete applications will not be processed.

- 1. Submit drawing with this application showing how the sign is to be erected & where it will be placed.
- Sign drawing must include the dimensions of the sign and lettering. Color is helpful.
 One application per sign

		IT
PROPERTY ADDRESS	Street Address 110 Menger Springs Business owner/ manager J	Ste. PREJECTE
PROJECT	Name of business Methodist Surgery Center Company Name	To large only
SIGN CONTRACTOR	Address 1731 3. San Marcos St. Bldg. 818	210-239-677 210-239-677
PROPERTY OWNER	Methodist Medical Center Address	Phone Zip
	sign wording Methodist logo "Methodist Surgery Center	Boerne"
SIGN INFORMATION	Sign is (circle one) Fermanent or Banner Type of Sign: Channel I-CHCF	YES NO
	Sign Height 4'-7" Sign Width 9'-7" Area of 8	D LA
	20 FT 18'8" 7'6.5" () = H311	vali (if applicable) LOCET + 1419 Landmark Commission?
	YES NO	YES NO

I, the undersigned, do hereby acknowledge that signage work must comply with all city Ordinance stipulations and requirements and that all improper work is subject to a fine of up to \$1,000.00 per day. Further, I do certify that I am authorized to request this permit by the owner of the real property where the sign will be erected. Banner permits are issued for 30 days each with a maximum of five (5) allowed per year per address with 20 day in between banner posting. Failure to obtain a permit before construction begins will result in the fee being doubled.

Printed name ASHEU SCHREDE Signature

Code Enforcement Phone: 830-248-1529 Fax 830-249-7202



1116 FOWLER STREET, OLD HICKORY, TN 37138 515.226.4577 / bennusigns.com

METHODIST AMBULATORY SURGERY CENTER C/O HCA

CLIERL

110 MENGER SPRINGS BOERNE, TX 78006

PROJECT ADDRESS

TONY HATCHELL

METHODIST MEDICAL CENTER

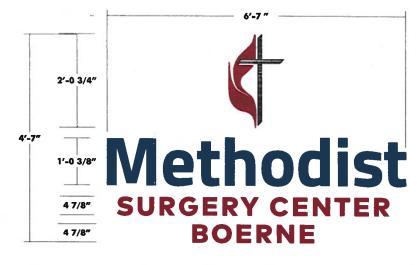
DAVID GREEN

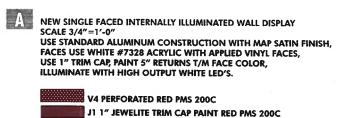
BOERNE

501220 QUOTE #

09	01/31/2020
10	02/14/2020
11	02/18/2020
12	02/19/2020
13	02/25/2020
14	02/28/2020 ADDED ADDRESS
15	05/05/2020
16	

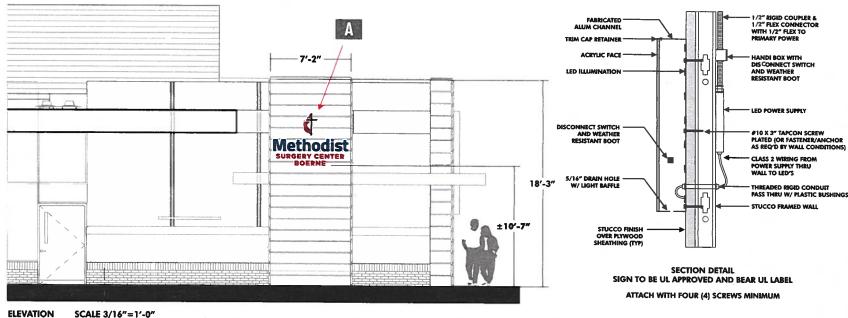
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J2 1" JEWELITE TRIM CAP PAINT BLUE PMS 289C

V4 PERFORATED BLUE PMS 289C





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PREPARED BY.

METHODIST MEDICAL CENTER BOERNE

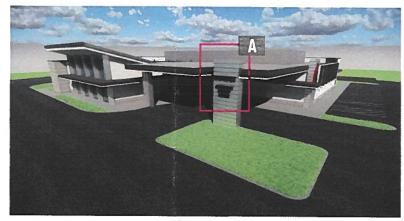
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FRONT ENTRANCE PERSPECTIVE



BACK VESTIBULE PERSPECTIVE



STAFF ENTRANCE PERSPECTIVE



MECHANICAL YARD PERSPECTIVE



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EFASED BY.

METHODIST MEDICAL CENTER BOERNE

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