

Grant County Conservation, Sanitation & Zoning Dept.  
150 W Alona Ln, Lancaster WI 53813  
608-723-6377 ext. 4

# ZONING PERMIT APPLICATION

THIS PERMIT WILL EXPIRE ONE YEAR FROM THE DATE ISSUED

Property Owner(s) Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Property Owner Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Property Address if different: \_\_\_\_\_

Parcel ID Number: \_\_\_\_\_ Township: \_\_\_\_\_

Acres: \_\_\_\_\_ Legal Desc: SEC. T N, R W ¼ ¼

## DESCRIBE YOUR BUILDING PROJECT

Type of Structure(s): \_\_\_\_\_ Intended Use(s): \_\_\_\_\_

Living Quarters: Yes No Number of Bedrooms: \_\_\_\_\_  
Structure Height: \_\_\_\_\_ Length: \_\_\_\_\_ Width: \_\_\_\_\_ Area Sq. Ft: \_\_\_\_\_ Number of floors above grade: \_\_\_\_\_

**PLUMBING:** Will any of the structures have internal plumbing? YES NO If yes, enter Sanitary Permit#: \_\_\_\_\_

**CONTRACTOR INFO:** Builder Name \_\_\_\_\_ Builder Phone # \_\_\_\_\_

**PROPOSED SETBACKS:** Centerline of Road: \_\_\_\_\_ Front Property Line: \_\_\_\_\_ Rear Yard Property Line: \_\_\_\_\_  
Side Yard #1: \_\_\_\_\_ Side Yard #2: \_\_\_\_\_ Edge of Stream: \_\_\_\_\_

**Will you be creating a new driveway?** Yes No If yes, contact town chairperson to obtain a driveway permit.

**Will you need a Fire Number?** Yes No If yes, identify the name and phone number of the utilities serving this property

Electric Company: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Sewer & Water Utility: \_\_\_\_\_ Phone Number: \_\_\_\_\_  Private Sewer/Well  
Private Security Company: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**FEE SCHEDULE:** is based upon the estimated value of the proposed construction/improvement to the property with a cost of \$1.00 per \$1,000.00 of estimated value. For projects \$300,000 or greater, increase to \$2/\$1000 estimated cost.

**Minimum of \$100.00** (Example: If the construction cost \$204,000 the permit fee is \$204.00. If construction costs \$304,000 permit fee is \$608.00)

**ESTIMATED VALUE OF WORK/IMPROVEMENT:** \$ \_\_\_\_\_, **FEE ENCLOSED:** \$ \_\_\_\_\_

I/We, the undersigned, acknowledge I/We are the owner(s) of the property, and are applying for a Zoning Permit to the Grant County Conservation, Sanitation & Zoning Dept. for the proposed work described and located on the property described herein. I/We, the undersigned, acknowledge that by making this application we are responsible for all work/improvements (described in this application & plot plan) to be done in accordance with the requirements of the Grant County Comprehensive Zoning Ordinance, applicable township and county ordinances and the laws of the State of Wisconsin. I/We, the undersigned, acknowledge to be responsible for contacting the Grant County Conservation, Sanitation & Zoning Dept. for each required inspection as directed by the Zoning Administrator or Zoning Technician. Property owner(s) signature grants consent for CSZD staff to enter upon applicant's property pursuant to the Grant County Comprehensive Zoning Ordinance and acknowledgement of above information

**Failure to comply with these requirements is a violation of the Grant County Comprehensive Zoning Ordinance.**

**Owner(s) Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### OFFICE USE ONLY

Zoning District: \_\_\_\_\_

Minimum Setback Requirements: Side Yard \_\_\_\_\_ Ft., Rear Yard \_\_\_\_\_ Ft., Front Yard \_\_\_\_\_ Ft., Center of Street/Road \_\_\_\_\_ Ft.

Shore-land/Wetland Protection Ordinance Zoning District: \_\_\_\_\_ FIRM/Flood Study: \_\_\_\_\_

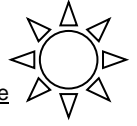
Reviewed by: \_\_\_\_\_  Approved  Denied Date \_\_\_\_\_

X - Coordinates  Y - Coordinates  Assigned Fire Number  Town Notified

### PARCEL SKETCH (SEE NEXT PAGE FOR EXAMPLE)

Parcel Sketch **MUST INCLUDE** the distances in feet from all property lines, road or highway center line, septic tank, drain field, well, and also show the driveway coming off of the public road to the improvements:

- Structure/improvement being applied for in this application, include all decks, patios and retaining walls
- Existing structures (label) on your property
- Please call the CSZD for Road and Property line setbacks Indicate approximate North direction by filling in the triangle

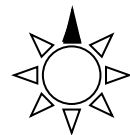


*Rear Lot Line*

*Front Lot Line*

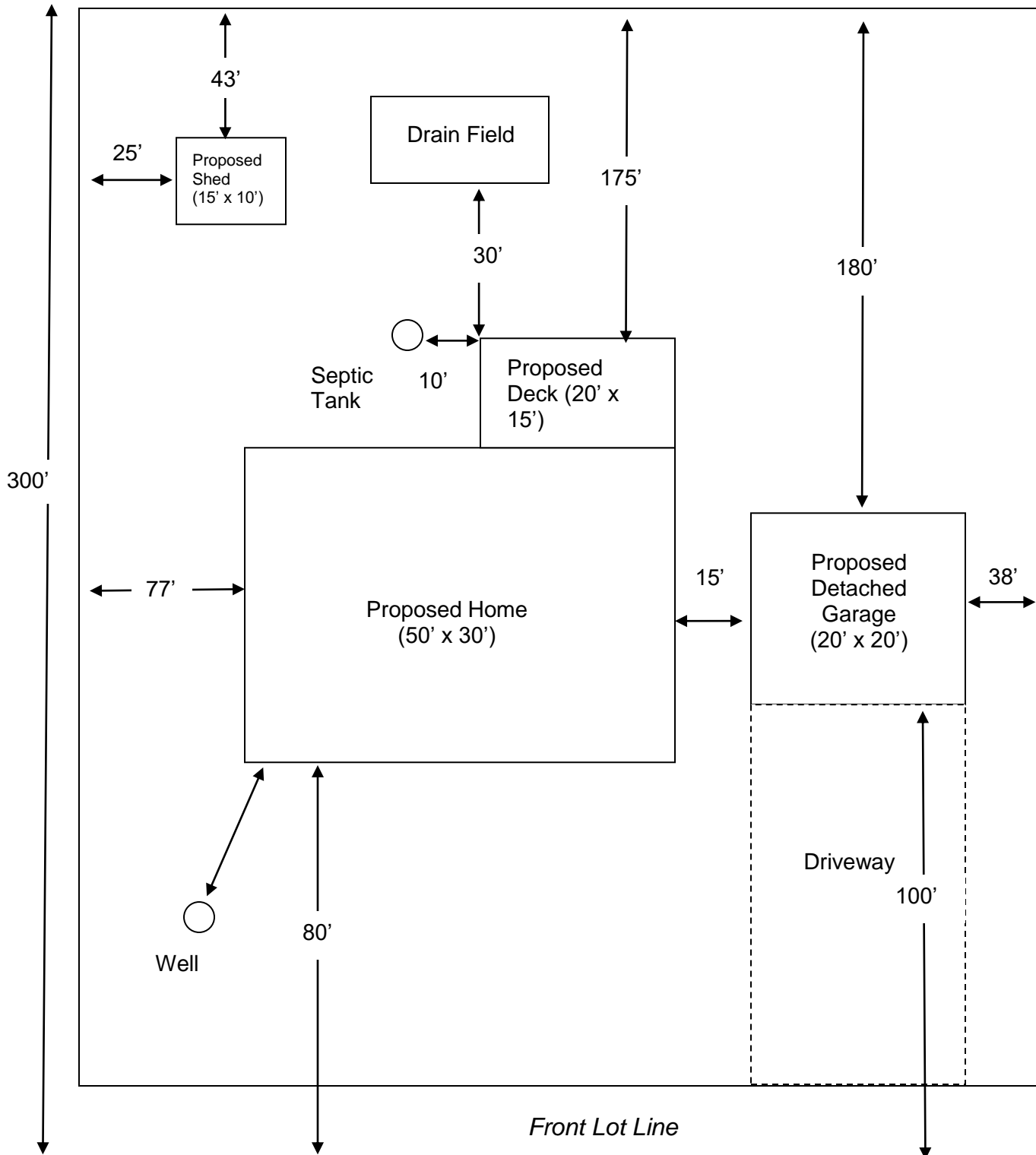
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Road Center Line

# EXAMPLE PARCEL SKETCH



Rear Lot Line

200'



Front Lot Line

Road Center Line

