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## APPLICATION FOR SHORELAND ZONING PERMIT

THIS PERMIT WILL EXPIRE ONE YEAR FROM THE DATE ISSUED RETURN TO: GRANT COUNTY CONSERVATION, SANITATION & ZONING DEPT. 150 W. ALONA LN., SUITE #1, LANCASTER, WI 53813

Property Owned by: (First)		Phone Number:
(First)	(Middle Initial)	(Last)
Mailing Address:		email:
	Property De	escription
Tax Parcel #:	Town of:	Section/Town/Range:
Tua Turcor III	10 (11 011	
Property Address:		Name of watercourse:
	Description of Propo	osed Construction:
	Minimum Setbac	k Requirements
		of a River or Stream is <u>75 feet</u> . (The setback must be measured from est angle regardless of property lines)
		Yard - (R/W line)Ft./Center line of RoadFt.
(Front yard setback is measured	from the R/W Line and Center greatest setback	r Line of road, and of the two, you must use which ever is the
	Disclai	
DESCRIBED AND LOCATED HERI APPLICATION) TO BE DONE IN AC ORDINANCE AND ALL OTHER API	KES APPLICATION FOR A GRANT EIN. THE UNDERSIGNED IS RESPO CORDANCE WITH THE REQUIREN PLICABLE TOWNSHIP AND COUNTY	COUNTY SHORELAND/WETLAND ZONING PERMIT FOR WORK ONSIBLE FOR ALL WORK/IMPROVEMENTS (DESCRIBED IN THIS MENTS OF THE GRANT COUNTY SHORELAND/WETLAND ZONING ITY ORDINANCES AND THE LAWS OF THE STATE OF WISCONSIN. HON OF THE GRANT COUNTY SHORELAND/WETLAND ZONING.
PERMIT TO THE GRANT COUNT LOCATED ON THE PROPERTY DESC ARE RESPONSIBLE FOR ALL WORK WITH THE REQUIREMENTS OF THE AND COUNTY ORDINANCES A RESPONSIBLE FOR CONTACTIN	Y CONSERVATION, SANITATION CRIBED HEREIN. I/WE THE UNDEI /IMPROVEMENTS (DESCRIBED IN GRANT COUNTY COMPREHENSIVAND THE LAWS OF THE STATE OF THE GRANT COUNTY CONSER	HE PROPERTY AND ARE APPLYING FOR A SHORELAND ZONING & ZONING DEPT. FOR THE PROPOSED WORK DESCRIBED AND RSIGN ACKNOWLEDGE THAT BY MAKING THIS APPLICATION WE ITHIS APPLICATION & PLOT PLAN) TO BE DONE IN ACCORDANCE WE ZONING ORDINANCE AND ALL OTHER APPLICABLE TOWNSHIP WISCONSIN. I/WE THE UNDERSIGN ACKNOWLEDGE TO BE VATION, SANITATION & ZONING DEPT. FOR EACH REQUIRED ADMINISTRATOR OR ZONING TECHNICIAN.
		D UNTIL THE PROPERTY OWNER SIGNS THE STATEMENT BELOW ECEIVED THE FOLLOWING NOTICE:
LAKES, AND STREAMS. WETLANDS COMPLY MAY RESULT IN REMOV COSTS. FOR MORE INFORMATION http://dnr.wi.gov/topic/wetlands/i	S THAT ARE NOT ASSOCIATED WI AL OR MODIFICATION OF CONST , VISIT THE DEPARTMENT OF NA dentification.html OR CONTACT T	AL LAWS CONCERNING CONSTRUCTION NEAR OR ON WETLANDS, ITH OPEN WATER CAN BE DIFFICULT TO IDENTIFY. FAILURE TO FRUCTION THAT VIOLATES THE LAW OR OTHER PENALTIES OR TURAL RESOURCES WETLANDS IDENTIFICATION WEB PAGE AT THE DEPARTMENT OF NATURAL RESOURCES SERVICE CENTER.
		ON APPLICANT'S PROPERTY PURSUANT TO THE GRANT COUNTY AVE RECEIVED THIS NOTICE AND HAVE REVIEWED THE ENTIRE IIT.
Signature:		
Print Name:		Date:

ZONING OFFICE USE ONLY					
Zoning District	% Impervious Surface	_\$100 Fee Received:			
Date Approved, or Denied	Reason for Denial:	-			

## ZONING PERMIT CERTIFICATE OF COMPLIANCE AND INSPECTION RECORD

Contact our department when the footprint is marked and when the project is complete at 608-723-6080

DATE	INSPECTION TYPE / NOTES	APPROVED DENIED	INSPECTOR

## **Parcel Sketch**

Provide a detailed plot plan drawn to scale or with dimensions depicting the lot size with the setback locations of the proposed use including buildings, driveways, sidewalks, parking areas, septic system and wells pursuant to all property lines, abutting highways and the ordinary high water mark of any watercourse within 300 feet of any structure/improvement being applied for in this application.

Please call the CSZD for Road and Property line setbacks Indicate approximate North direction by filling in the triangle

Rear Lot Line	
	V .
Front Lot Line	