

# TOWN OF HARTLAND

W3446 Swamp Road  
Bonduel, WI 54107  
Clerk's Phone: 920-619-7696  
Zoning Administrator Phone: 920-785-7332

## ZONING PERMIT APPLICATION FORM

(office use only)  
Permit Number: \_\_\_\_\_  
Date Received: \_\_\_\_\_  
Filing Fee: Consult Town Fee Schedule (fee is nonrefundable after application is submitted)

### APPLICATION:

Project Address: \_\_\_\_\_

Description of Work: \_\_\_\_\_  
\_\_\_\_\_

Estimated Cost of Construction: \_\_\_\_\_

PERMIT TYPE:	BUILDING DIMENSIONS (LENGTH/WIDTH/HEIGHT)
<input type="checkbox"/> Residential Construction:	
<input type="checkbox"/> Addition to Existing Structure	
<input type="checkbox"/> Interior Alterations	
<input type="checkbox"/> New Building	
<input type="checkbox"/> Non-Residential Construction	

### DEVELOPMENT SITE: (In addition to the information below, please provide the Other Requirements-pg. 2)

Legal Description: \_\_\_\_\_

Zoning District: \_\_\_\_\_ Acreage of Site Parcel: \_\_\_\_\_

Setbacks: Sideyard 1 \_\_\_\_\_ ft from \_\_\_\_\_ lot line; Sideyard 2 \_\_\_\_\_ ft from \_\_\_\_\_ lot line;  
Rearyard \_\_\_\_\_ ft from \_\_\_\_\_ lot line; \_\_\_\_\_ ft from centerline of \_\_\_\_\_ (Road/Highway)

Tax Parcel Number: \_\_\_\_\_

Are you splitting an existing Parcel?  Yes  No

Are you combining Parcels?  Yes  No

### APPLICANT:

#### Primary Applicant:

Owner  Owner's Agent  Lessee  Contractor  Licensed Architect  Licensed Engineer

Address: \_\_\_\_\_

City / State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell / Telephone Number(s): \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Owner** (if not primary applicant listed above): \_\_\_\_\_

Address: \_\_\_\_\_

City / State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell / Telephone Number(s): \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

### TERMS AND AUTHORIZATION:

I understand that this form does not constitute a complete application or permit. Other submittal documents may be required for each permit application, as required by the Zoning Administrator. Page 2, and all submitted documents, are part of this application.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

# Other Requirements for Zoning Permit Application

**Site Plan:**

See Zoning Ordinance Section 2.5 (3) E. for site plan requirements; attached certified survey map, if available

**Building Plans:**

See Zoning Ordinance Section 2.5 (3) F. for building plan requirements

**Setbacks:**

Note all setbacks on Site Plan. See Zoning Ordinance Sections 2.8, 5.1, and 5.2

**Height:**

Note all building heights on Site Plan. See Zoning Ordinance Sections 2.8

**Staking:**

See Zoning Ordinance Section 2.5 (3) I. for staking requirements

**Modifications:**

Note any modifications as outlined in Zoning Ordinance Section 6 (if none, so state)

**Signs:**

Signs require a separate Sign Permit. See Zoning Ordinance Section 7

Applicant Notes:

1. Applicant has been provided copies of Sections 2, 5, and 6 of the Zoning Ordinance. If applicant's parcel is zoned FP, applicant has also been provided a copy of Section 14 of the Zoning Ordinance and must review this Section for restrictions not listed above.
2. It is the applicant's responsibility to address all deed restrictions and/or covenants governing the parcel.
3. The applicant is responsible for contacting the U. S. Army Corps of Engineers, and the Wisconsin Department of Natural Resources, for additional permits or determinations of wetlands in the project area.
4. The applicant is responsible for contacting Shawano County to determine all applicable County ordinances related to the project.
5. Applicant is responsible for following all Town Ordinances, including the Driveway Ordinance #2001-02.
6. Project must not adversely affect surface water drainage to neighboring parcels.
7. Applicant is responsible for contacting the Building Inspector for the issuance of a building permit, when applicable.
8. Applicant authorizes Town of Hartland designated official to inspect the premise for conformity to the permit.
9. Applicant is responsible to contact Zoning Administrator, within 10 days of completion of the project (before occupancy or use), to request a Certificate of Compliance.

Office Notes:

Date of first site inspection: \_\_\_\_\_ Initial \_\_\_\_\_  
 Date permit issued: \_\_\_\_\_ Initial \_\_\_\_\_  
 Certificate of Compliance date: \_\_\_\_\_ Initial \_\_\_\_\_  
 Comments:

Revised 3/20/13