

Parcel ID # _____

PERMIT # _____

Oneida County Zoning
P.O. Box 400
Rhineland, WI 54501

ONEIDA COUNTY
ZONING PERMIT APPLICATION
(Permit must be posted in a conspicuous location prior to and during construction)

Complete in black or blue ink only

Office Use Only:
Photos to be scanned? Yes No
File name: _____

Owner's last name:		First:	MI:
Address:			
City:	State:	Zip:	
Telephone number: () -		E-mail:	
Applicant's last name:		First:	MI:
Address:			
City:	State:	Zip:	
Telephone number: () -		E-mail:	
Contractor's last name:		First:	MI:
Address:			
City:	State:	Zip:	
Telephone number: () -		E-mail:	

PROPERTY INFORMATION

Section:	Township:	Range:	Acres:
Legal description (¼ ¼ , Gov't Lot, CSM)			
Subdivision and Lot #:			
Address and directions to property:			
Check one: <input type="checkbox"/> Shoreland property (within 1000' of lake or 300' from stream/river) <input type="checkbox"/> Non-shoreland property (If this is shoreland property, a Shoreland Alteration Permit may be required)			
Name of navigable water property abuts:			
Is property adjacent to a wetland, which is contiguous to a navigable water body?			
** Be advised that other permits may be required by other agencies such as town permits, State of WI Building Permits for Uniform Dwelling Code (UDC) requirements, driveway permits, and address application through Oneida Co. _____ owner/agent initials			
Is the proposed structure located within 330 ft of a public roadway that is intersected by a railroad? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is the excavated area greater than 10,000 sq ft? <input type="checkbox"/> Yes <input type="checkbox"/> No		What is the percent slope where the construction or excavation is taking place? _____	
Type: <input type="checkbox"/> Single family <input type="checkbox"/> Multiple family <input type="checkbox"/> Business <input type="checkbox"/> Mobile home park		Use: <input type="checkbox"/> Year round <input type="checkbox"/> Seasonal	
Construction type: <input type="checkbox"/> Site constructed <input type="checkbox"/> Mobile Home <input type="checkbox"/> Manufactured <input type="checkbox"/> Other (specify) _____		Water supply: <input type="checkbox"/> Private <input type="checkbox"/> Municipal <input type="checkbox"/> Other _____	
Sanitary/Sewer: <input type="checkbox"/> Sanitary Permit # _____ _____ <input type="checkbox"/> Existing septic system evaluation date: _____ <input type="checkbox"/> Sanitary district connection <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> Number of bedrooms upon completion: _____		Foundation: <input type="checkbox"/> Basement: <input type="checkbox"/> Finished <input type="checkbox"/> Unfinished <input type="checkbox"/> Walkout <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab <input type="checkbox"/> Other (specify) _____	

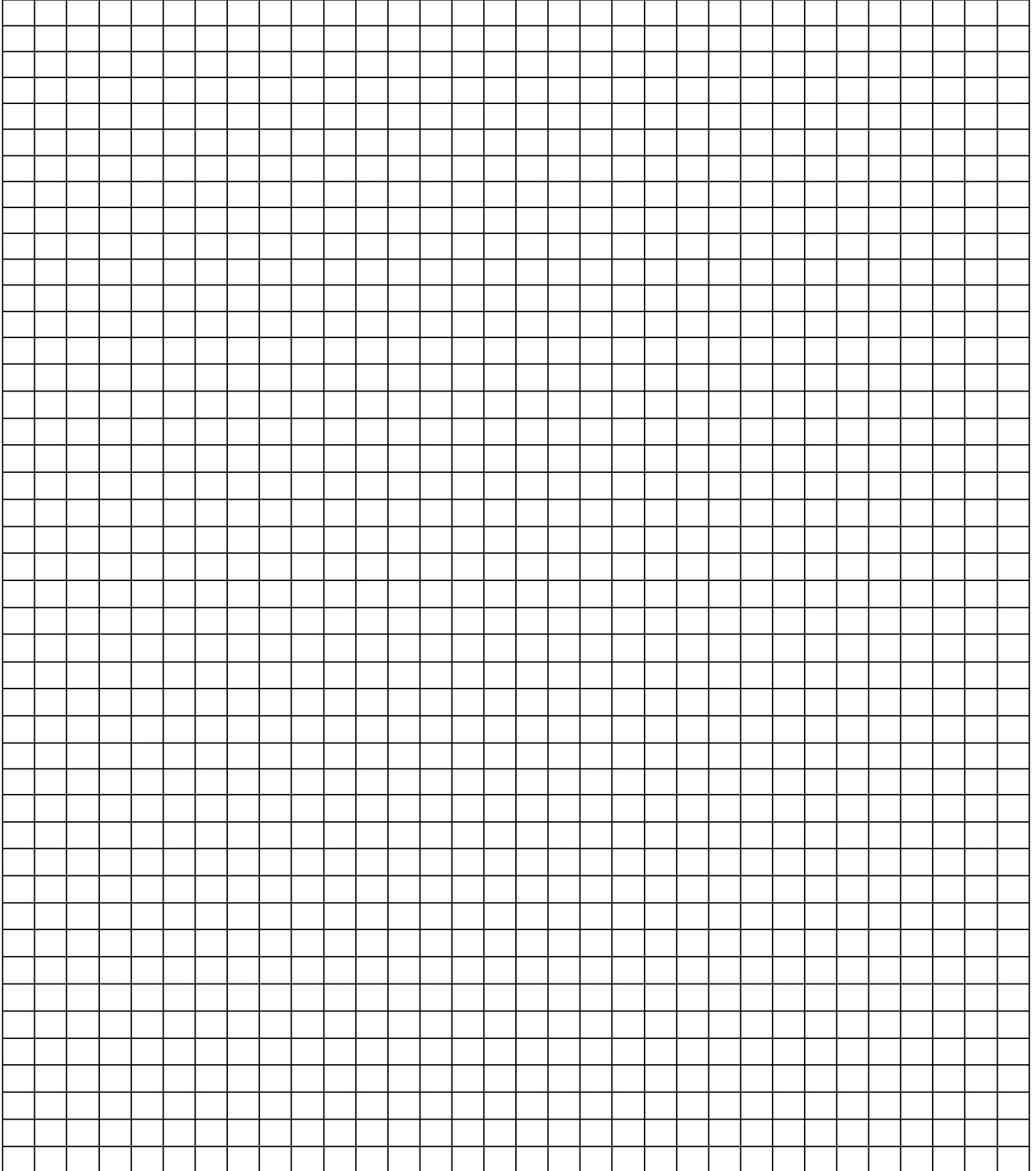
Check all that apply:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Dwelling | <input type="checkbox"/> Mobile home | <input type="checkbox"/> Garage/storage shed | <input type="checkbox"/> Enclosed or covered porch |
| <input type="checkbox"/> Workshop | <input type="checkbox"/> Basement | <input type="checkbox"/> Deck | <input type="checkbox"/> Boathouse/boat shelter |
| <input type="checkbox"/> Sunroom | <input type="checkbox"/> Entryway | <input type="checkbox"/> Loft | <input type="checkbox"/> Addition to: _____ |
| <input type="checkbox"/> Well house | <input type="checkbox"/> Gazebo | <input type="checkbox"/> Walkway | <input type="checkbox"/> Commercial: _____ |
| <input type="checkbox"/> Kennel/animal shelter | <input type="checkbox"/> Change of use | <input type="checkbox"/> Patio | <input type="checkbox"/> Other: _____ |

(All items checked must be listed as a project on this application. This is not an all-inclusive list. Please add any items not specified on the list above under "Other" items.)

Are architectural, engineering, or contractor plans available for the building(s) and/or other structures on the property? If so, please attach. If not, please provide a scaled drawing of the buildings below.

Drawings must be accurate and to scale if possible (1 square = 4 ft) (indicate north with arrow)



PROPOSED PROJECT DETAIL

Project 1:	Permit type: <i>(office use only)</i>	Permit sub-type: <i>(office use only)</i>
Building Dimensions: Length _____ Width _____ Height _____ # of stories _____	Sq ft: (specify each level) Total sq ft = _____	
Total fair market value, including labor upon completion: \$ _____	Fee: \$ _____	
Project 2:	Permit type: <i>(office use only)</i>	Permit sub-type: <i>(office use only)</i>
Building Dimensions: Length _____ Width _____ Height _____ # of stories _____	Sq ft: (specify each level) Total sq ft = _____	
Total fair market value, including labor upon completion: \$ _____	Fee: \$ _____	
Project 3:	Permit type: <i>(office use only)</i>	Permit sub-type: <i>(office use only)</i>
Building Dimensions: Length _____ Width _____ Height _____ # of stories _____	Sq ft: (specify each level) Total sq ft = _____	
Total fair market value, including labor upon completion: \$ _____	Fee: \$ _____	

ZONING PERMIT EXPIRATION: A Zoning Permit shall expire two years from the date of issuance and may not be renewed. The footings, foundation or slab and the outside shell of the structure must be complete at the time the original permit expires. If the footings, foundation or slab and the outside shell are not complete within two years, a new Zoning Permit must be applied for and approved.

APPLICANTS CERTIFICATION: The undersigned hereby applies for the above-described Zoning Permit and certifies that the information provided is complete, accurate, and that all projects will be completed in compliance with the requirements of the Oneida County Zoning & Shorelands Protection Ordinance and all other applicable ordinances and laws of the State of Wisconsin. The applicant understands that the issuance of this permit creates no legal liability, express or implied, on Oneida County and that failure to comply with the permit may result in suspension or revocation of this permit or other penalty.

You are responsible for complying with State and Federal laws concerning construction near or on wetlands, lakes and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Department of Natural Resources wetlands identification page at <http://dnr.wi.gov/topic/wetlands/locating.html> or contact a Department of Natural Resources Service Center.

Additional responsibilities for owners of projects disturbing one or more acres(s) of soil. I understand that this project is subject to NR 151 regarding additional erosion control and storm water management and will comply with those standards. For more information, visit the Department of Natural Resources or contact a Department of Natural Resources Service Center.

Print name (owner/agent) _____ Date _____
 Signature (owner/agent) _____ Date _____

OFFICE USE ONLY

Zoning district: _____	Floodplain? ? <input type="checkbox"/> Yes <input type="checkbox"/> No	Map #: _____	FIRM dated: _____
This application has been reviewed pursuant to ordinance dated: _____			
Remarks and/or conditions of issuance:			
Sanitary inspection fee: _____		Total fee: _____	Receipt #: _____
Granted by: Zoning Director's signature _____ Committee approval (Revised 4/15)		(staff initials)	Issued date: _____
			Expiration date: _____

ADDITIONAL PROPOSED PROJECT DETAILS (if needed)

Project 4:	Permit type: <i>(office use only)</i>	Permit sub-type: <i>(office use only)</i>
Building Dimensions: Length _____ Width _____ Height _____ # of stories _____	Sq ft: (specify each level) Total sq ft = _____	
Total fair market value, including labor upon completion: \$ _____	Fee: \$ _____	
Project 5:	Permit type: <i>(office use only)</i>	Permit sub-type: <i>(office use only)</i>
Building Dimensions: Length _____ Width _____ Height _____ # of stories _____	Sq ft: (specify each level) Total sq ft = _____	
Total fair market value, including labor upon completion: \$ _____	Fee: \$ _____	
Project 6:	Permit type: <i>(office use only)</i>	Permit sub-type: <i>(office use only)</i>
Building Dimensions: Length _____ Width _____ Height _____ # of stories _____	Sq ft: (specify each level) Total sq ft = _____	
Total fair market value, including labor upon completion: \$ _____	Fee: \$ _____	
Project 7:	Permit type: <i>(office use only)</i>	Permit sub-type: <i>(office use only)</i>
Building Dimensions: Length _____ Width _____ Height _____ # of stories _____	Sq ft: (specify each level) Total sq ft = _____	
Total fair market value, including labor upon completion: \$ _____	Fee: \$ _____	
Project 8:	Permit type: <i>(office use only)</i>	Permit sub-type: <i>(office use only)</i>
Building Dimensions: Length _____ Width _____ Height _____ # of stories _____	Sq ft: (specify each level) Total sq ft = _____	
Total fair market value, including labor upon completion: \$ _____	Fee: \$ _____	
Project 9:	Permit type: <i>(office use only)</i>	Permit sub-type: <i>(office use only)</i>
Building Dimensions: Length _____ Width _____ Height _____ # of stories _____	Sq ft: (specify each level) Total sq ft = _____	
Total fair market value, including labor upon completion: \$ _____	Fee: \$ _____	
Project 10:	Permit type: <i>(office use only)</i>	Permit sub-type: <i>(office use only)</i>
Building Dimensions: Length _____ Width _____ Height _____ # of stories _____	Sq ft: (specify each level) Total sq ft = _____	
Total fair market value, including labor upon completion: \$ _____	Fee: \$ _____	
Project 11:	Permit type: <i>(office use only)</i>	Permit sub-type: <i>(office use only)</i>
Building Dimensions: Length _____ Width _____ Height _____ # of stories _____	Sq ft: (specify each level) Total sq ft = _____	
Total fair market value, including labor upon completion: \$ _____	Fee: \$ _____	