



Village of • Genoa City •

PO Box 428 | 755 Fellows Rd | Genoa City, WI 53128
(262) 279-6472 | Fax: (262) 279-6618

Tax Parcel #:

Zoning Permit Application

Please check all that apply:

- ☐ Residential (Single-Family)
- ☐ Residential (Multi-Family)
- ☐ Residential Addition/Alteration
- ☐ Residential Accessory Use
- ☐ Deck
- ☐ Fence
- ☐ Swimming Pool
- ☐ Signage
- ☐ Other: _____

➡ A survey showing location of the proposed structure, and fees must accompany this application and be received by the Zoning Administrator for review before the issuance of a zoning permit. Missing information may cause the delay of review or a returned/denied application.

Owner Name(s): _____

Mailing Address: _____ Phone: _____

_____ Email: _____

Project Address (if different than above): _____

Applicant/Agent Name: _____

Mailing Address: _____ Phone: _____

_____ Email: _____

Subdivision Name: _____ Lot #: _____ Block #: _____

Current Zoning of Site: _____ Current Overlay Districts of Site: _____

Proposed Type of Structure: _____

Proposed Use of Structure or Site: _____

Lot Area: _____ sq. ft. Proposed Building / Structure Footprint of Area: _____ sq. ft.

Existing Building Coverage on Site: _____ % Proposed: _____ %

Proposed Setbacks: Front _____ Rear _____ Left _____ Right _____

Proposed Structure Dimensions: _____ X _____ Proposed Building Height: _____ ft.

Estimated Project Cost: \$ _____

Sanitary Facilities: _____ Municipal Sewer _____ Septic System

The Owner(s) agrees to comply with the Village of Genoa City Municipal Code and with the conditions of this permit; understands that the issuance of the permit creates no legal liability, expressed or implied, of the Department, Municipality, Agency, or Inspector; and certifies that all information is accurate.

Property Owner(s):

Name – Print

Name – Signature

Date

Name – Print

Name – Signature

Date

Applicant/Agent of all Owners:

Name – Print

Name – Signature

Date

COST RECOVERY AGREEMENT

I/We, the undersigned, do hereby understand and agree that as an applicant or petitioner of the Village of Genoa City, I/We will be responsible for all normal fees payable by an applicant or petitioner (e.g. application fees, engineer fees, attorney fees, etc.). I/We further understand and agree to be responsible for any additional or consequential costs to the municipality as a result of my/our application or petition (i.e. engineering, legal, or other professional services). All fees and costs shall be paid within thirty (30) days and must be paid prior to the Village holding any public hearings, meetings, and the issuance of any permit or license. If payment is not made, said fees and costs may be assessed against the real property as a special charge.

I/We understand that the Village of Genoa City by and through their agents, representatives (elected or appointed), employees, successors or assignees make no representations of their findings. I/We forever hold them harmless of all liability whether founded in tort or contract and as such agree to indemnify them from all claims arising out of these transactions.

Property Owner(s):

Name – Print

Name – Signature

Date

Name – Print

Name – Signature

Date

Applicant/Agent of all Owners:

Name – Print

Name – Signature

Date

Office Use Only:

PERMIT FEES:

Zoning Permit Fee: \$ _____

Property Records Maintenance Fee: \$ _____

Other Charges: \$ _____

TOTAL FEES: \$ _____

PERMIT # _____

Issued By: _____ Date: _____

John Cole

Phone: 262-949-5583

☐ Final Inspection Required