

Return this form to:

Town of Strongs Prairie
P. O. Box 69
Arkdale, WI 54613

TOWN OF STRONGS PRAIRIE ZONING PERMIT APPLICATION

1. Date of Application: _____

Permit No.: _____

2. Applicants Name: _____

3. Property Owner: _____

Mailing address: _____

City, state, zip: _____

Phone: _____

4. Contractor: _____

5. Property description:

Town Zoning District: _____

Shoreland area: ___ Yes ___ No

Wetland area: ___ Yes

No

Address: _____

Lot #: _____ Subdivision: _____

Legal description: _____

6. Property size:

Width: _____ Length: _____ No. Acres: _____

7. Property use:

Existing use(s) of property & structure(s):

Principal structure: _____

Accessory structure(s): _____

Land use(s): _____

Proposed use(s) of property & structure(s):

Principal structure: _____

Accessory structure(s): _____

Land use(s): _____

8. Submit plot plan showing those **applicable** of the following:

- | | |
|--|--|
| 1. Lot and dimensions. | 5. Existing & proposed use of each structure. |
| 2. Existing & proposed structures. | 6. All setbacks (lot line, adjacent structures, road, well, septic {tank & drain field}, surface water). |
| 3. Abutting roads, lakes, and streams. | 7. Building plans for new construction. |
| 4. Existing & proposed driveways, off street parking areas, open space, landscaping. | 8. Elevations of existing & proposed structures. |

9. The undersigned hereby applies for a zoning permit, and agrees that all work will be done in accordance with County zoning, Town of Strongs Prairie zoning, building code, and/or subdivision ordinances, and all laws of the State of Wisconsin.

10. By signing this application you give permission to Town officials to inspect the property listed in item 5.

X. Signature of owner / agent: _____ Phone: _____

____ Approved Date: _____

____ Denied Date: _____

Signature of zoning official: _____

APPLICATION FOR BUILDING PERMIT

Name: _____

Address: _____

Telephone: _____

Location: (legal description) _____ 1/4 of _____ 1/4, of Section _____, T. _____, R. _____

Present Zoning: _____

Describe your building project:

VALUE OF ADDITIONS INCLUDE MATERIAL AND THE PREVAILING WAGE RATE.

If a residence addition, when was your present residence constructed? _____

(If built after June 1980, all additions costing more than 20% of equalized value shall be inspected.)

NOTE: Even though your building does not need to be inspected it must meet state codes.

Owner &/or Agent

Date _____

Received by _____