



TOWN OF LAND O' LAKES BUILDING PERMIT APPLICATION

DATE OF APPLICATION _____

PERMIT # _____

PLEASE READ AND INITIAL _____ Under penalty of laws, no construction to begin until permit has been approved and permit card is posted at the entrance of the property. Upon approval the owner agrees that all structures and all work performed on this property will conform to or exceed the minimum requirements as prescribed in the Town of Land O' Lakes Zoning Ordinance and all other applicable Vilas County Zoning Ordinances, and laws of the State of Wisconsin. Upon approval of this application the owner agrees that should a violation be found by the Zoning Administrator, said violation from the date of notification will, within 30 day or less, be corrected at the owner's expense, otherwise each day thereafter shall constitute a separate offence. ****NOTICE**OTHER VILAS COUNTY AND/OR STATE PERMITS MAY BE REQUIRED. PLEASE PROVIDE BLUEPRINTS WITH APPLICATION IF AVAILABLE.**

LOCATION OF PROPERTY: _____ PARCEL # _____

OWNER: _____

CONTRACTOR: _____

ADDRESS: _____

ADDRESS: _____

PHONE: _____

PHONE: _____

EMAIL: _____

EMAIL: _____

OWNER OR CONTRACTORS SIGNATURE: _____

GOVT.LOT#: ___ OR ___ 1/4 ___ 1/4 SECTION ___ TOWN ___ RANGE ___ E. ZONE DIST. ___ SUB. DIV. ___

LOT SIZE: ___ x ___ SQ.FT. ___ NEW BUILDING(s) SIZE(s) #1 ___ X ___ #2 ___ X ___ #3 ___ X ___

CONSTRUCTION TO BE: New Addition Moving Alterations Frame Brick Block
Pre-Fab Mobile Home Other (Describe) _____

PROPOSED USE: _____ BEDROOMS# _____ STORIES # _____ TOTAL HEIGHT _____
(Office, Bath, Bedroom Storage, etc.)

SEASONAL USE PERMANENT RESIDENCY SANITATION Permit# _____ WATER WELL

BUILDER _____ ADDRESS _____ PHONE: _____

ELECTRICIAN _____ ADDRESS _____ PHONE: _____

WELL INSTALLER _____ ADDRESS _____ PHONE: _____

PLUMBER _____ ADDRESS _____ PHONE: _____

SEPTIC TANK INSTALLER _____ ADDRESS _____ PHONE: _____

SOIL TESTED BY _____ ADDRESS _____ PHONE: _____

ESTIMATED COST OF:
STRUCTURE \$ _____

PERMIT FEE:
\$ _____

Payment: _____

WELL \$ _____

Date Received: _____

SEPTIC \$ _____

OTHER \$ _____

\$ _____

TOTAL \$ _____

\$ _____

Checks payable to the Town of Land O' Lakes

APPLICATION APPROVED DENIED DATE: _____ EXPIRES: _____

ZONING ADMINISTRATOR SIGNATURE _____

- IMPORTANT PLEASE READ THIS -




Building setback on federal, State and County Highways to be regulated by County Zoning Administrator. Building setback on Town roads to be regulated by Town Board.

Attach or draw a sketch showing the location of the following: BUILDINGS, SEPTIC SYSTEM, WATER WELL, ROADS, WATERWAY, LOT LINES, and the separating distances in feet from each of the aforementioned. Also indicate NORTH.

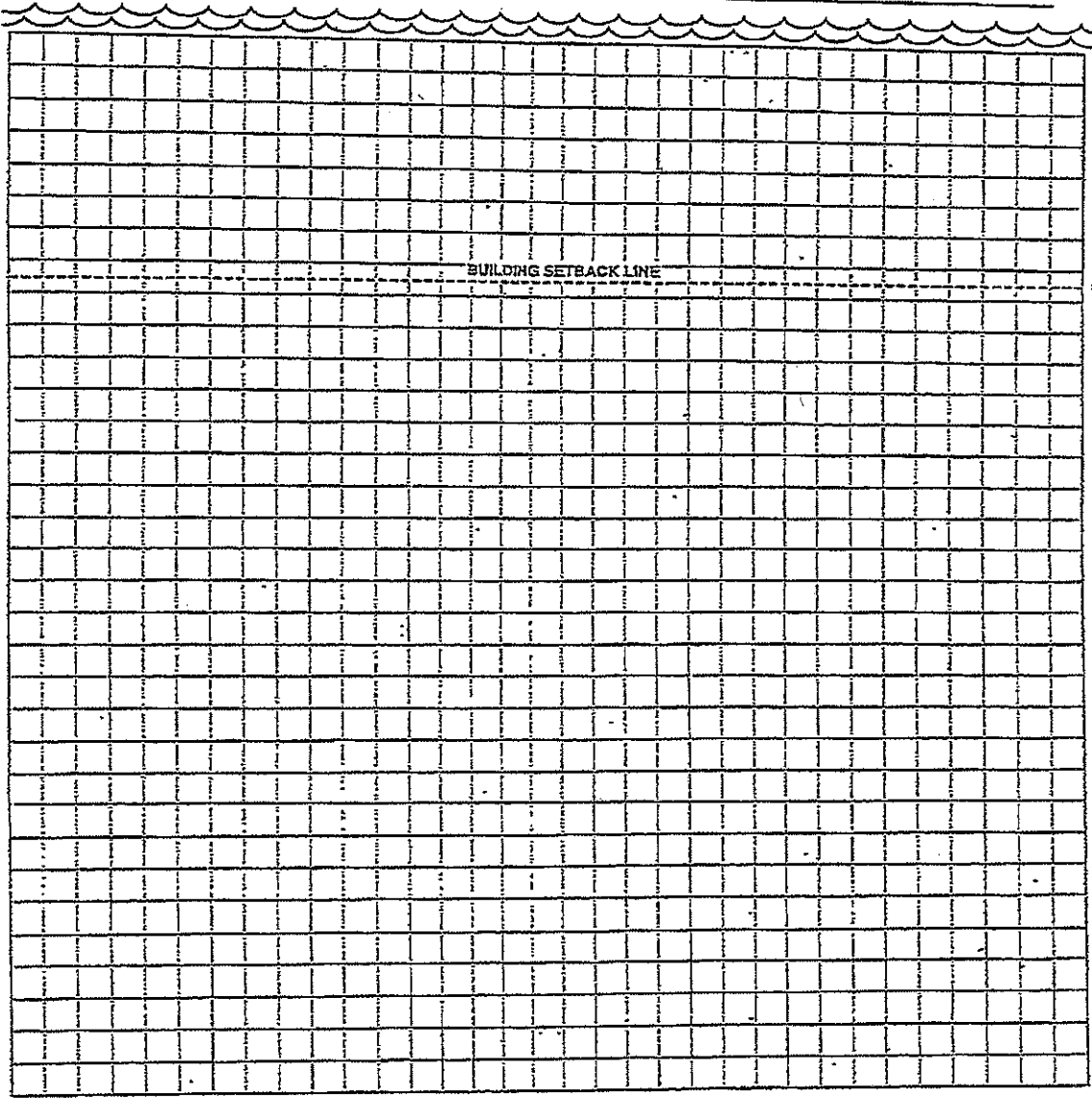
SEWAGE DISPOSAL UNIT INFORMATION

Effluent Distance from own well feet	Effluent Distance from adjacent wells feet feet	Effluent Distance from lake or stream feet
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Indicate on lot where and which of these were used for sewage disposal

septic tank =  dry well =  field system = *~~~~~* bed =  water well = X

NAME OF LAKE, STREAM, OR WATERCOURSE



INDICATE DISTANCE FROM CENTER OF HIGHWAY OR TOWN ROAD TO NEAREST STRUCTURE

I, _____ hereby certify that all of the information, measurements and drawings contained in this permit application are true and correct, and that no additions, subtractions or changes therefrom shall occur without the express written approval of the local zoning deputy and/or the county zoning administrator. Furthermore, all individuals involved in the planning, building or any installations are knowledgeable of all of the information contained herein, and I will personally inform all individuals involved to insure that all information contained herein is known to them and must be followed exactly without deviation therefrom.

Signed _____	Date _____
INSPECTION RECORD	INSPECTOR
BUILDING LOCATION	DATE



TOWN OF LAND O' LAKES
BUILDING PERMIT APPLICATION FEES
EFFECTIVE NOVEMBER 1, 2025

DWELLING – TOTAL SQ. FT. LIVING AREA	\$.25 PER SQ. FT.*
ADDITIONS	\$.25 PER SQ. FT.*
TOTAL REMODELING	\$.25 PER SQ. FT.*
DECK	\$ 100.00
PORCH	\$ 100.00
DEMOLITION OF EXISTING BUILDING	\$ 100.00
SUBDIVISION 1-3 LOTS	\$ 300.00
ADDITIONAL LOTS EXTRA	\$ 50.00 PER LOT
COMMERCIAL BUILDING	\$.25 PER SQ. FT.*
ATTACHED GARAGE/ADDITIONAL	\$ 100.00
UNATTACHED GARAGE UNDER 1,000 SQ. FT.	\$ 100.00
UNATTACHED GARAGE OVER 1,000 SQ. FT.	\$ 200.00
BOATHOUSE	\$ 100.00
MOVE A BUILDING	\$ 100.00
PERMIT RENEWAL	\$ 100.00
PERMIT MODIFICATIONS	\$ 100.00
ADDITIONAL INSPECTIONS	\$ 50.00
CONDITIONAL USE PERMIT	\$ 400.00
REZONING OR TEXT AMENDMENT	\$ 400.00
APPEAL TO BOARD OF ADJUSTMENT	\$ 400.00
TEMPORARY PERMIT	\$ 100.00
*MINIMUM PERMIT FEE	\$ 100.00
SIGN PERMIT	\$ 50.00
FIRE NUMBERS	\$ 150.00
DRIVEWAY PERMIT	\$ 100.00
JUNKED VEHICLES PERMIT	\$ 100.00
UTILITY PERMIT	\$ 100.00

PERMITS ARE VALID FOR ONE (1) YEAR FROM DATE OF APPROVAL.

COMPLETION DATE: TWO (2) YEARS FROM APPROVAL DATE.

PERMITS: CONTACT JOHN VOSS (715) 337-5256