

ZONING OR REMODELING APPLICATION VILLAGE OF WHITE LAKE

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ZONING PERMIT APPLICANT: \$40 FEE PAID: _____ PERMIT#: _____

OWNER _____ PHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

SITE ADDRESS IF DIFFERENT:

Name of Contractor/Builder/Agent: _____ Telephone: _____

Gov't. Lot _____ 1/4 _____ 1/4 Section _____, T _____, R _____ E Parcel# _____ Lot Size _____

Other Permits That May Be Required: Building Permit- UDC Inspector Sanitary Permit No. _____
Contact Duff Leaver at 715-216-4734

Work Consists of: (Check all that apply)

New Building:	Addition:	Remodel:
Residence _____	Residential _____	Kitchen/Dining _____
Att. Garage _____	Commercial _____	Living Room _____
Mfd. Home _____	Industrial _____	Bedroom(s) _____
Garage or _____	Other (Specify) _____	Bath(s) _____
Storage Building _____	_____	Other (Specify): _____
Deck/Porch _____	_____	_____

Use of Structure _____ Type of Foundation _____
 Type of Construction _____ Estimated Value _____
 Proposed Building Size _____ Wide x _____ Long Height to Peak _____ No. of Bedrooms _____
 Other Building _____ Wide x _____ Long Height to Peak _____
 Setback from Lake or Stream Ordinary High Water Mark _____
 Highway Class A - B - C _____ Road Name _____ Setback from ROW _____

The undersigned hereby makes application for the above permit for the work described and located as shown herein. The undersigned agrees that all such work shall be done in accordance with all requirements of the Zoning Ordinance and all other applicable ordinances of the Village of White Lake and all applicable laws and regulations of the State of Wisconsin. The undersigned hereby grants the Village permission to enter upon and inspect the property as needed. If within six (6) months of the date of issuance of this permit the proposed construction or use has not been commenced, said permit shall expire. A one (1) time no charge extension may be requested prior to the expiration date. If permit is let to expire, a new application and fee is required. Owner or agent agrees to have proposed construction substantially completed, i.e. exterior shelled in and finished, within twenty-four (24) months of the original permit issue date. Any statement made, site plan submitted, assurance given or permit erroneously issued contrary to this ordinance shall be null and void.

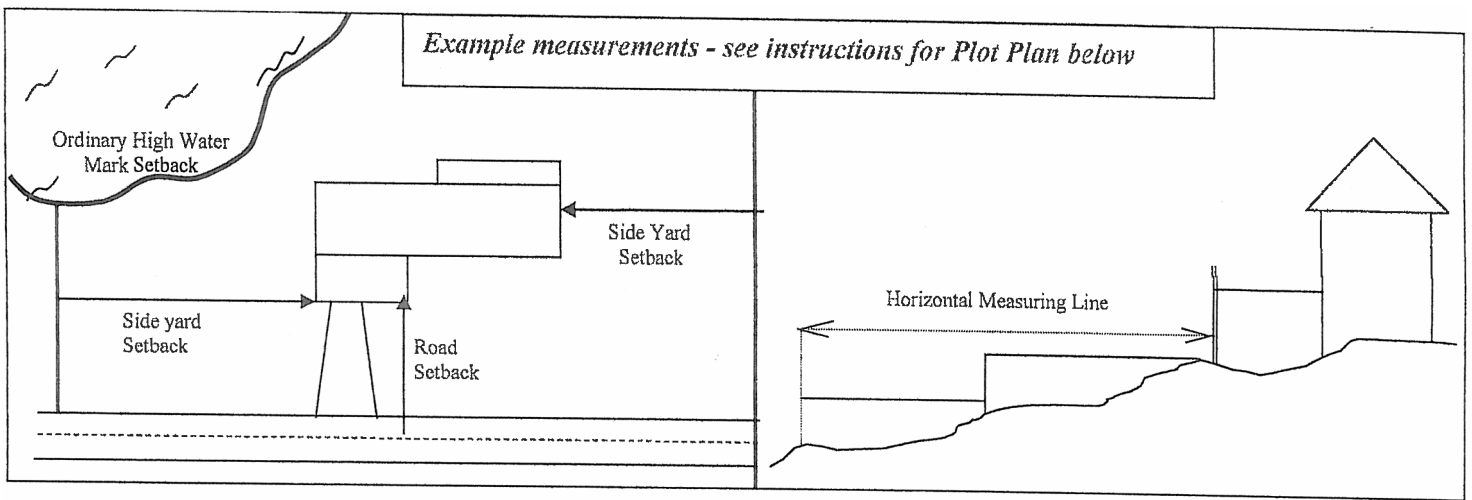
Signature of Owner or Agent _____ Date _____

FOR OFFICE USE ONLY

Inspection: Date: _____ Remarks: _____
 Date: _____ Remarks: _____

Permit Approved: YES or NO Action required for approval: _____

Permit Denied for the following reason(s) _____




Plot Plan Instructions: Use the area provided below, or a separate piece of paper, to show ALL of the following items:

1. The location and size of all proposed and existing buildings
2. The location of any lake, flowage, stream or river that either abuts or is near your property.
3. The location and name of all roads.
4. The location of any Easements (road, utility or other).
5. The location of any proposed or existing well(s).
6. Location of Privately Owned Wastewater Treatment System (POWTS). A POWTS includes a septic tank, holding tank, mound system or drainfield.
7. Show distances in feet from:
 - a) Buildings to lot lines
 - b) Buildings to center of roads and/or edge of easements
 - c) Buildings to ordinary high water mark of any lake, river, stream or wetland, if applicable

All measurements are from the furthest extension of the structure (eaves, overhangs, etc are part of the structure) to the nearest point of a setback.

When measuring setback distance on a sloping building site, the measurement must be done on a HORIZONTAL (flat) MEASURING LINE. The horizontal measuring line is created by holding the measuring tape level AND NOT MEASURING ALONG THE SLOPE. Depending on the amount of slope, several short measurements may have to be made.

Plot Plan (Attach additional page if needed, not to exceed 8 ½ x 14)



North

The owner or agent hereby attests the plot plan above, or attached, is an accurate representation of the property and structures located thereon.

Signature: _____

Date: _____