

Town of Clayton Zoning Permit

Please complete this side of application
Review Fee is \$120

Review by Appointment Only - Please Call
Tom Spierowski (920) 428-3361

| | | | | | | | | | | | | | | | | |
|---|-------------------|----------------|---------------|---------------|-------------------|----------------|------------|---------------|---------------|----------------|------------|---------------|----------------|----------------|------------|---------------|
| Tax Parcel No.: _____ | | | | | | | | | | | | | | | | |
| Property Owner: _____ <input type="checkbox"/> The property owner and applicant/builder are the same | | | | | | | | | | | | | | | | |
| Applicant or builder: _____ | | | | | | | | | | | | | | | | |
| Mail Permit To: <input type="checkbox"/> Property Owner <input type="checkbox"/> Applicant/Builder | | | | | | | | | | | | | | | | |
| Mailing Address: _____ City: _____ State: _____ Zip: _____ | | | | | | | | | | | | | | | | |
| Contact Name: _____ Phone: _____ Cell phone: _____ Email: _____ | | | | | | | | | | | | | | | | |
| Construction Site Address: _____ City: _____ Zip: _____ Plat Name/CSM: _____ Lot: _____ Block: _____ S: _____ T: _____ R: _____ Lot Size: _____ | | | | | | | | | | | | | | | | |
| Existing Use: <input type="checkbox"/> Single Family Dwelling <input type="checkbox"/> Vacant <input type="checkbox"/> Other: _____ | | | | | | | | | | | | | | | | |
| Existing Structures: <input type="checkbox"/> None <input type="checkbox"/> House <input type="checkbox"/> Garage <input type="checkbox"/> Attached <input type="checkbox"/> Detached <input type="checkbox"/> Other: _____ | | | | | | | | | | | | | | | | |
| Proposed Start Date: _____ | | | | | | | | | | | | | | | | |
| Construction: <input type="checkbox"/> Principal <input type="checkbox"/> Accessory | | | | | | | | | | | | | | | | |
| Type of Construction: <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Other: _____ | | | | | | | | | | | | | | | | |
| Describe Proposed Construction: _____ | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">1st Floor:</td> <td style="width: 20%;">Wall Hgt _____</td> <td style="width: 20%;">Size _____</td> <td style="width: 20%;">Sq. Ft. _____</td> </tr> <tr> <td>2nd Floor:</td> <td>Wall Hgt _____</td> <td>Size _____</td> <td>Sq. Ft. _____</td> </tr> <tr> <td>Other:</td> <td>Wall Hgt _____</td> <td>Size _____</td> <td>Sq. Ft. _____</td> </tr> <tr> <td>Garage:</td> <td>Wall Hgt _____</td> <td>Size _____</td> <td>Sq. Ft. _____</td> </tr> </table> | 1st Floor: | Wall Hgt _____ | Size _____ | Sq. Ft. _____ | 2nd Floor: | Wall Hgt _____ | Size _____ | Sq. Ft. _____ | Other: | Wall Hgt _____ | Size _____ | Sq. Ft. _____ | Garage: | Wall Hgt _____ | Size _____ | Sq. Ft. _____ |
| 1st Floor: | Wall Hgt _____ | Size _____ | Sq. Ft. _____ | | | | | | | | | | | | | |
| 2nd Floor: | Wall Hgt _____ | Size _____ | Sq. Ft. _____ | | | | | | | | | | | | | |
| Other: | Wall Hgt _____ | Size _____ | Sq. Ft. _____ | | | | | | | | | | | | | |
| Garage: | Wall Hgt _____ | Size _____ | Sq. Ft. _____ | | | | | | | | | | | | | |
| Attached? Y N Overall Structure Hgt: _____ Mid-Peak Height: _____ | | | | | | | | | | | | | | | | |
| Estimated Cost: \$ _____ Walk-out Basement: <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | | | | | | | |

| | |
|---|----------------|
| Fee Received: _____ Received by: _____ Receipt No.: _____ | For office use |
| <p>1. In accordance with Wisconsin State Statute 59.691, the information provided herein is to give you notice regarding potential wetlands. 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 waters 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.</p> <p>For more information, visit the Department of Natural Resources Wetland Identification web page listed or contact your local DNR office. Http://dnr.wi.gov/topic/surfacewater/swdv</p> <p>As the applicant, I hereby acknowledge notice of this wetland information.</p> <p>2. Permission is hereby granted for Town Zoning Staff to enter the property for inspection purposes until a Certificate of Compliance is issued.</p> <p style="text-align: right;">Signature: _____ Date: _____</p> <p style="text-align: center;">PERMIT IS NULL & VOID IF ISSUED IN ERROR OR IF APPLICANT MISREPRESENTS</p> | |

