



Village of East Troy

The Good Neighbor Community

2015 Energy Dr.
East Troy, WI 53120

Building Inspector (262) 642-6255
Fax: (262) 642-6259

Application for Zoning Permit

Fee Pd. \$ _____ (See fee schedule) Receipt No. _____

Application No. _____ Zoning Permit No. _____

Zoning District: _____ Tax Key # _____

Owner: _____ Contractor: _____

Address: _____ Address: _____

Daytime Phone No. (_____) _____ Daytime Phone No. (_____) _____

Address of Premises (if different from above) _____

Legal Description: _____

Detailed description of proposed work to be completed and intended use: _____

Type of existing structures on the lot and their use _____

Approximate cost of project (including labor and materials): \$ _____ Non-conforming percentage _____

EXISTING

Sanitary Facilities: Sewer _____ Leach Bed _____

Dry Well _____ Holding Tank _____

Mound System _____ Other _____

Type of Water Supply: Private _____ Other _____

Non-Conforming Structure: Y _____ N _____

Structure Size: Width _____ Depth _____

Height _____

Structure Style: 1 Story _____ 2 Story _____ Split Level _____

Number of Bedrooms: _____ Number of Bathrooms _____

Floor Area: 1st Floor _____ 2nd Floor _____

Garage: _____ Basement _____

Other: _____

Total Sq. Ft. (all bldgs) _____

Size of Lot: Average Width _____ Average Depth _____

Location of Structure (including proposed additions) on lot. Measure to overhang only if it exceeds 2 feet.

Setback _____ feet from Building foundation to centerline of road.

Setback _____ feet from Building foundation to established road right-of-way (Base Setback line)

Offset _____ feet from Building foundation to _____ property line.

Offset _____ feet from Building foundation to _____ property line.

Offset _____ feet from Building foundation to _____ property line.

Shore setback _____ feet from building foundation to ordinary high water mark.

Floodplain/Wetland/Conservancy setback _____ feet from Building foundation to 100 year floodplain or C-1 (_____' elev).

A copy of the percolation tests and soil borings, the sanitary permit no. for new septic installations and three copies of a site plan must be submitted with this application. This site plan must be an accurate map, drawn to scale (survey preferred), showing the following: 1) Location and dimensions of lot; 2) Location and dimensions of all existing and proposed buildings on the lot and those located with 50 feet of lot; 3) Location, centerline and grade of all abutting streets; 4) Floor elevation of proposed new buildings; 5) High water line of any water body which lot abuts; 6) Location of any existing or proposed well and septic systems on the lot and within 50 feet of said lot; 7) Location of any percolation tests and soil borings. Building plans and a grading plan may also be required. An incomplete application form or missing information will cause delay in issuance of zoning permit, and the application may be returned for additional information. Construction must start within six (6) months and be completed within 18 months of the zoning permit date of issue. The undersigned states that the foregoing information is true and accurate to the best of his or her knowledge; it is hereby agreed that for and in consideration of the issuance of a zoning permit that the foregoing work will be carried out as defined in this application; that all applicable ordinances or codes of the state, county and village will be complied with in carrying out the proposed work stated in the application; that work will not commence before a building permit has been obtained from the village building inspector. If any changes or deviations are made from the original application, a new permit is required. Failure to comply with the permit as issued will result in the revocation of the permit or other permits.

Signature of owner/applicant _____ Date _____

Application (approved) (denied) by Zoning Administrator/Building Inspector _____ Date _____

Conditions for approval or reasons for denial _____