

**WAUKESHA COUNTY DEPARTMENT OF PARKS AND LAND USE
PLANNING AND ZONING DIVISION**

515 W. Moreland Blvd. Room AC230 Waukesha, Wisconsin 53188 (262) 896-8300
Email pod@waukeshacounty.gov Website www.waukeshacounty.gov/planningandzoning

ZONING PERMIT APPLICATION SUBMITTAL FORM AND CHECKLIST

Prior to an Application for a Zoning Permit being considered complete for review purposes, the following information must be submitted with the application.

****Electronic submittals shall be sent via email to pod@waukeshacounty.gov or planning staff only. No external devices such as thumb drives, CD's, etc. may be submitted and will be returned due to County IT policies. If you are not able to submit items electronically, you may drop off items with the receptionist in Room AC260 (address above), but this is a drop off service only and you will be unable to meet with the POD/PZD staff. Please indicate to whose attention your items are for. If not known, label them c/o Planning and Zoning Division/POD. The items are distributed daily.***

*****To assist with electronic submittals for Zoning Permits, a [fillable Zoning Permit application form](#) has been developed for your use and submittal. **Please note: The form must be saved ('save as') to your local desktop BEFORE filling in the application or the form you complete will not be saved and you will have to start over.*****

- ☐ A complete Application for a Zoning Permit with owner signature or a complete Landowners Authorization Agent Form.
 - ☐ If a structure contains a nonconforming use or is located in the floodplain, a *Nonconforming Use and Structure Value Worksheet* shall be completed.
- ☐ Fee (see *Fee Schedule* at <https://www.waukeshacounty.gov/ZPFees/?LangType=1033>). You can call the receptionist at 262.896.8300 to pay by credit card, or by check payable to the Department at the above address. Include a note that states the payment is for your specific permit type or application along with the owners' name. NOTE: Items will not be processed until payment is received.
- ☐ One (1) electronic* **scaled** Plat of Survey (stamped by PLS) or accurate Site Plan drawn **to scale**. The map shall include:
 - ☐ Location and centerline of all road right-of-ways and access easements.
 - ☐ Lot dimensions and area.
 - ☐ Ordinary High Water Mark and 1% chance floodplain locations and elevations, if applicable. *0.2% chance floodplain required if mapped on the property per the County's GIS or if the natural grade at a proposed structure is located within 2 vertical ft. of the 1% chance floodplain.
 - ☐ Environmental Corridor/Isolated Natural Resource Area and wetland locations, if applicable.
 - ☐ Location and dimensions of all existing **and** proposed structures on the lot **and** their uses **and** existing structures **and** their uses on adjacent lots (for averaging purposes). In the Town of Delafield, buildings on adjacent lots located within 20 ft. of a proposed principal building must also be identified.
 - ☐ Location and surface area of all impervious surfaces on waterfront riparian lots **or** non-riparian lots located entirely within 300 ft. of a navigable waterway. Refer to *Impervious Surface Worksheet and Application*.
 - ☐ Existing trees/vegetation within 300 ft. of a navigable waterway, if applicable. Refer to *Shoreland Cutting/Vegetation Removal Worksheet and Application*.
 - ☐ Location of existing/proposed wells and septic systems on the lot **and** within 50 ft. of the lot.
 - ☐ Additional features may be required to be shown in accordance with the Ordinance.
- ☐ One (1) electronic* set of **scaled** building plans, including the following:
 - ☐ Elevation renderings of all sides of the proposed structure.
 - ☐ Interior floor plan of all levels of the proposed structure.
 - ☐ Wall section, including foundation wall.
 - ☐ Square footage of each floor.
- ☐ Preliminary Site Evaluation (PSE) or Sanitary Permit Number issued by the Waukesha County Environmental Health Division (EHD) unless served by public sewer. The PSE or Sanitary Permit application can be applied for with the EHD in Room AC260 of the Waukesha County Administration Center, 262-896-8300 or sod@waukeshacounty.gov, and can be reviewed concurrently.
NOTE: HOWEVER, APPROVAL BY THE ENVIRONMENTAL HEALTH DIVISION IS REQUIRED PRIOR TO THE ISSUANCE OF A ZONING PERMIT, UNLESS SERVED BY PUBLIC SEWER.
- ☐ One (1) electronic* **scaled** Grading Plan(s) for new homes **and** any permit application that involves significant grading, including the following:
 - ☐ One (1) or two (2) foot contours. Proposed contours must tie into existing contours on the same plan. Plan must be prepared by a professional engineer, surveyor, or landscape architect.
 - ☐ Proposed yard grade and floor elevations. **If a basement is proposed within an area indicative of seasonal high groundwater conditions, or is near surface water, a wetland, or other known potential sources of groundwater, a *Form A in accordance with the Basement Wetness Technical Standards* shall be completed for review and approval. A *Form A* requires soil borings.**
 - ☐ Proposed slopes shall not exceed 3:1.

**AN INCOMPLETE APPLICATION FORM OR MISSING INFORMATION WILL CAUSE DELAY IN THE ISSUANCE OF THE ZONING PERMIT, AND THE APPLICATION MAY BE RETURNED FOR ADDITIONAL INFORMATION.
CONSTRUCTION MUST START WITHIN 6 MONTHS AND BE COMPLETED WITHIN 18 MONTHS OF THE DATE OF ISSUANCE OF THE ZONING PERMIT.**

Zoning Permit Application

Waukesha County Department of Parks and Land Use Planning and Zoning Division

515 W. Moreland Blvd. Room AC260 Waukesha, Wisconsin 53188 (262) 896-8300
Email pod@waukeshacounty.gov Website www.waukeshacounty.gov/planningandzoning

Please complete this application and submit it to the Planner of the Day (pod@waukeshacounty.gov) along with any supplemental information and plans. An invoice number will be provided to you after the initial intake review to pay the required application fee. An updated fee schedule is available here: <https://www.waukeshacounty.gov/parks-and-land-use/planning-and-zoning/division-fees/>

Tax Key No(s). _____

Address of Premises _____

Property Owner

Name _____

Email _____

Phone No. _____

Applicant/Agent

Name _____

Email _____

Phone No. _____

Scope of Work (check all that apply)

Interior Remodeling	Addition to Principal Structure	Accessory Building (New/Remodel)	New Residence	Deck/Patio/Walkway
Boathouse (New/Remodel)	Swimming Pool	Multi-Family	New Industrial/Commercial	Cellular/Co-Location
Other				Sign

Description of proposed work to be completed:

Sanitary Facilities (check one) Public Sewer Septic/Holding Tank

Sanitary Permit No. (new construction) _____

Existing Structure(s) Check if vacant

Proposed Structure(s) only include new sq. ft. for additions

Principal Structure 1st floor (sq. ft.) _____ 2nd floor (sq. ft.) _____

Principal Structure 1st Floor (sq. ft.) _____ 2nd floor (sq. ft.) _____

Att. Garage (sq. ft.) _____ Basement (sq. ft.) _____ Exposed Y__ N__ Partial__

Att. Garage (sq. ft.) _____ Basement (sq. ft.) _____ Exposed Y__ N__ Partial__

Structure Size Height _____

Structure Size Height _____

No. of Bedrooms _____ **No. of Bathrooms** _____

No. of Bedrooms _____ **No. of Bathrooms** _____

Other structures (type/sq. ft.) _____

Other Structures (type/sq. ft.) _____

Building Footprint (all roofed structures) _____
 **(exclude area of 2' overhang or less for building footprint calculation)

Accessory Building Footprint _____

Total B.F. % _____

Size of Lot Average Width _____

Total Area (excluding established road ROW) _____

Applicant Certification

By accepting and acknowledging this form, the owner agrees that the foregoing information is true and accurate to the best of his/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 municipality will be complied with in carrying out the proposed work stated in the application; and that work will not commence before a building permit has been obtained from the local/town 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 penalties. Further, by accepting and acknowledging this form, the owner or his/her authorized agent is giving their consent for the Dept. of Parks and Land Use to inspect the site as necessary and related to this application even if the property has been posted against trespassing pursuant to Wis. Stat.; and serves as acceptance of the wetland statement included on the Property Owner letter issued with the Zoning Permit.

Owner Signature: _____ **Date:** _____

Zoning Permit Worksheet

The Applicant is responsible for filling out the **"Proposed"** section on the below table for the improvements specified above.

	Structure 1 (please specify) (_____)			Structure 2 (please specify) (_____)			
	Existing	Proposed	Required	Existing	Proposed	Required	Notes
Road Setback							
Offset ()							
Offset ()							
Offset ()							
Total Building Footprint							
Accessory Building Footprint							
Building Height							
Shore Setback							
Wetland Setback							
Floodplain Setback							
Impervious Surface							

***If more than two (2) structures are proposed, please attach an additional page

For Office Use Only

Fee Pd.: \$_____ Receipt No.: _____ ATF Y___N___ Reviewed by: _____ PSE Approved: Y___N___NA ___

X-Ref: BOA File No. _____ SPPO File No. _____ CU File No. _____

Nonconforming Structure Y___ N___ Zoning District(s): _____

Shoreland Protection Ordinance

Zoning Code

Other

Application Status

Approved

Denied

Signature of Zoning Administrator

Date

Date Stamp:

Received

Dept of Parks and Land Use