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

515 W. Moreland Blvd. Room AC230 Waukesha, Wisconsin 53188 (262) 548-7790 Email <u>pod@waukeshacounty.gov</u> Website <u>www.waukeshacounty.gov/planningandzoning</u>

ZONING PERMIT APPLICATION SUBMITTAL FORM AND CHECKLIST

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

*Electronic submittals shall be sent via email to <u>pod@waukeshacounty.gov</u> 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 <u>https://www.waukeshacounty.gov/ZPFees/?LangType=1033</u>). You can call the receptionist at 262.548.7790 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* <u>scaled</u> Plat of Survey (stamped by PLS) or accurate Site Plan drawn <u>to scale</u>. 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 <u>and</u> proposed structures on the lot <u>and</u> their uses <u>and</u> existing structures <u>and</u> 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 <u>or</u> 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 <u>and</u> within 50 ft. of the lot.
 - Additional features may be required to be shown in accordance with the Ordinance.
- □ One (1) electronic* set of **<u>scaled</u>** 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: APPROVAL BY THE ENVIRONMENTAL HEALTH DIVISION IS REQUIRED <u>PRIOR TO</u> THE ISSUANCE OF A ZONING PERMIT, UNLESS SERVED BY PUBLIC SEWER.
- □ One (1) electronic* <u>scaled</u> Grading Plan(s) for new homes <u>and</u> 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, <u>or</u> 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 <u>START</u> WITHIN 6 MONTHS <u>AND</u> BE <u>COMPLETED</u> WITHIN 18 MONTHS OF THE DATE OF ISSUANCE OF THE ZONING PERMIT.

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APPLICATION FOR A ZONING PERMIT					
FOR OFFICE USE ONLY (Form Created 11/08/16)	DATE STAMP				
Fee Pd.: Receipt No.: ATF Yes No Reviewed	by: PSE approval date:				
ZP Appl. No ZP Permit No		RECEIVED			
BOA File No SPPO File No	CU File No				
File: Building Inspector: Town Assessor: Owner:	_ Applicant:				
Zoning Code: Shoreland and Floodland Protection Ordinance: Zo	oning District(s):	DEPT OF PARKS &			
Legal Description		LAND USE			
Nonconforming Structure: Yes No					
Nonconforming Use or Nonconforming Structure in Floodplain: Yes No <i>Structure Value Worksheet</i> is required.	If Yes, a separate Nonconforming Use and				
Impervious Surface Regulated: Yes No If Yes, a separate Impervious	Surface Worksheet and Application is required.				
Mitigation Required: Yes No If Yes, a separate <i>Mitigation Permitti</i>	ng Worksheet is required.				
- APPLICANT – PLEASE READ APPLICATION SUBMITTAL REQUIRI	EMENTS (SEPARATE FORM ATTACHED) A	ND COMPLETE ALL BELOW:			
Town Tax Key No(s)	Address of Premises				
Owner(s)	Applicant (if different)				
Mailing Address	MailingAddress				
Email Address	Email Address				
Daytime Phone No. ()	Daytime Phone No. ()				
Detailed and complete description of <u>proposed</u> work to be completed <u>and</u> t	he intended use(s) (attach additional pages, if neces	ssary)			
Type of existing structures on the lot <u>and</u> the use(s) of each					
Sanitary Facilities Public sewer Yes No If no. type of private sewage sy	stem Sanitary Permit No. (fo	or new construction)			

Sanitary Facilities Public sewer Yes No If no, type of private sewage system	Sanitary Permit No. (for new construction)				
Water Supply Private Other	Cost Estimate of Improvements \$				
EXISTING STRUCTURE(S)	PROPOSED STRUCTURE(S) only include <u>new</u> sq. ft. for additions				
Principal Structure 1 st floor (sq. ft.) 2 nd floor (sq. ft.)	Principal Structure 1 st Floor (sq. ft.) 2 nd floor (sq. ft.)				
Att. Garage (sq. ft.) Basement (sq. ft.)Exposed Yes No Partial	Att. Garage (sq. ft.) Basement (sq. ft.) Exposed Yes No Partial				
Structure Size Width Depth Height	Structure Size Width Depth Height				
Structure Style 1 Story 2 Story Split level	Structure Style 1 Story 2 Story Split level				
No. of Bedrooms No. of Bathrooms	No. of Bedrooms No. of Bathrooms				
Other structures (type/sq. ft.)	Other Structures (type/sq. ft.)				
Total SF Existing (all SF except basement)	Total SF Proposed (all SF except basement)				
Total SF (Existing + Proposed) Building Footprint (all roofed structures) (except basement) (except basement) (exclude area of 2' overhang or less for building footprint)					

Size of Lot Average Width Ave	rage Depth
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Principal

Proposed setbacks/offsets for planned improvements Decks Accessory Measure to the overhang only if it exceeds two (2) ft., otherwise measure as noted below. and Structure(s)

Total Area (excluding established road ROW) _

	Structure(s)	Structure(s)	and Patios	Measure to the overhang <u>only if</u> it exceeds two (2) ft., otherwise measure as noted below.	
Road Setback				feet from the building foundation to the established road right-of-way line (base setback line).	
Offset				feet from building foundation to the (N,S,E,W) property line.	
Offset				feet from building foundation to the (N,S,E,W) property line.	
Offset				feet from building foundation to the (N,S,E,W) property line.	
Floodplain setback				feet from building foundation to the floodplain (FP elevation datum).	
Wetland setback				feet from building foundation to the wetland.	
Shore setback				feet from closest point of structure to the OHWM.	

The undersigned states 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 information is the and accurate to the best of mis/her knowledge, it is hereby lapted that for and in consideration of the issuance 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 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. By signing 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 your acceptance of the wetland statement included on your Property Owner letter issued with your permit.

Signature of Owner					Date	
Application Approved	Denied	by Zoning Administrator		Date		
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SEE ATTACHED SHEET FOR CONDITIONS OF APPROVAL OR REASONS FOR DENIAL

Revised 02/16/22