



# Village of Pardeeville

## ZONING PERMIT APPLICATION

\*THIS APPLICATION MUST INCLUDE A SITE PLAN MAP

Owner Name \_\_\_\_\_ Date \_\_\_\_\_  
 Owner Address \_\_\_\_\_ Contact Phone \_\_\_\_\_  
 Owner Email Address \_\_\_\_\_

Applicant Name (Contractor, Architect, Engineer, if different) \_\_\_\_\_  
 Applicant Address \_\_\_\_\_ Contact Phone \_\_\_\_\_  
 Applicant Email Address \_\_\_\_\_  
 Site Location/Address \_\_\_\_\_  
 Existing Use \_\_\_\_\_

Type of Development	Site Information
---------------------	------------------

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Change in Use<br><input type="checkbox"/> Garage<br><input type="checkbox"/> Fence<br><input type="checkbox"/> Deck<br><input type="checkbox"/> New Construction<br><input type="checkbox"/> Tree Planting | <input type="checkbox"/> Access<br><input type="checkbox"/> Pool<br><input type="checkbox"/> Accessory Building<br><input type="checkbox"/> Addition<br><input type="checkbox"/> Sign<br><input type="checkbox"/> Antenna / Tower | <input type="checkbox"/> Wetlands<br><input type="checkbox"/> Underground Tanks<br><input type="checkbox"/> Floodplains<br>Front Setback _____ Percent of Lot Coverage _____<br>Rear Setback _____ Lot Square Foot _____<br>Side Setback #1 _____ Easement _____<br>Side Setback #2 _____ Height _____ |
|---|---|--|

Special Considerations
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- Does this project require a site visit? Yes No
- Does this project require a land survey? Yes No
- Does this project require a utility locate? Yes No Date of requested locate \_\_\_\_\_
- Estimated Land Distrurbance Area (square feet) \_\_\_\_\_

*The Zoning Administrator may request additional information during the review of the Zoning Application.  
 The Zoning Administrator may require a site survey by an RLS if proposed uses/structures occur within 2 feet of the applicable setback lines.*

Building Information
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- |   |   |                               |
|---|---|-------------------------------|
| <input type="checkbox"/> Building Permit Required | Building height _____                   | Square footage main _____     |
| <input type="checkbox"/> Home/Condo Association   | Maximum length _____                    | Square footage basement _____ |
|   | Maximum width _____                     | Square footage upper _____    |
|   | Accesorry building square footage _____ |                               |

**Applicant's Signature** \_\_\_\_\_

*This permit shall become void at the expiration of 120 days after the date of issuance unless construction is started.*

*All construction shall be completed within 18 months.*

*If any deviations are made from the original application, a new permit is required.*

*Once a Zoning Permit is issued the fee becomes non-refundable. Fees are based on a sliding scale per our \*Permit and Fee Schedule\*.*

*This permit shall be posted in a conspicuous location on the premises and shall remain in-place during the entire period of the construction.*

**Comments:**

Date \_\_\_\_\_

\*Fee \_\_\_\_\_

Permit Number \_\_\_\_\_

Tax Parcel Number \_\_\_\_\_

**Zoning Administrator** \_\_\_\_\_