

ZONING APPLICATION

Town of Clayton Town Hall

8348 Hickory Ave

Larsen, WI 54947

Phone: 920-836-2007

Website: <https://www.townofclayton.net/>Email: administrator@claytonwinnebago.gov
Office Use Only

Date: _____ / _____ / 20____

Paid: \$ _____
☐ Check ☐ Cash ☐ Credit/Debit CardBy: Please make checks payable to:
TOWN OF CLAYTON

Receipt #: _____

Please complete this side of application

PROPERTY INFORMATION

Parcel ID / Tax Key No.: 006-_____

APPLICANT or BUILDER
PROPERTY OWNER (IF NOT THE SAME)

Name _____

Name _____

Street Address _____

Street Address _____

City _____ State _____ Zip Code _____

City _____ State _____ Zip Code _____

Phone _____

Phone _____

E-mail _____

E-mail _____

CONSTRUCTION SITE INFORMATION:

Plat Name/CSM: _____

Lot: _____ Lot Size: _____

Street Address _____

Block: _____ S: _____ T: _____ R: _____

City _____ State _____ Zip Code _____

Existing Structures: ☐ None ☐ House ☐ Garage-AttachedExisting Use: ☐ Single Family Dwelling ☐ Vacant☐ Garage-Detached☐ Other: _____☐ Other: _____

Proposed Start Date: _____

Construction: ☐ Principal ☐ Accessory**Describe Proposed Construction:** _____**Type of Construction:** ☐ New ☐ Addition ☐ Alteration☐ Other: _____

1st Floor: Wall Hgt: _____ Size: _____ Sq. Ft.: _____

Estimated Cost: \$ _____ Walk-Out Basement: ☐ Yes ☐ No

2nd Floor: Wall Hgt: _____ Size: _____ Sq. Ft.: _____

Garage: Wall Hgt: _____ Size: _____ Sq. Ft.: _____

Other: Wall Hgt: _____ Size: _____ Sq. Ft.: _____

Overall Structure Hgt: _____ Mid-Peak Hgt: _____

APPLICANT ACKNOWLEDGEMENT & SIGNATURE

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.

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>

As the applicant, I hereby acknowledge notice of this wetland information.

2. Permission is hereby granted for Town Zoning Staff to enter the property for inspection purposes until a Certificate of Compliance is issued.

Signature _____

Today's Date _____

PERMIT IS NULL & VOID IF ISSUED IN ERROR OR IF APPLICANT MISREPRESENTS ANY FACTS

Office Use Only

Current Zoning: _____

Future Land Use: _____

Overlays: SL _____ WL _____ FP _____ SWDD _____ Potential Wetlands: _____
Air _____ EXT _____ None _____
BP _____ PO _____ Access Controlled _____

Special Standards Sec.: _____

Sewer: Y N Sanitary District: _____ Update: _____ New: _____ N/A: _____

Private: Y N

Sanitary Permit #: _____ Date: _____ Issued By: _____

EC/SW N/A: _____ Permit #: _____ Date: _____ Issued By: _____

SETBACKS

Principal

Accessory

Street _____ / _____	Rear _____ / _____	Street _____ / _____	Rear _____ / _____
Side _____ / _____	Side _____ / _____	Side _____ / _____	Side _____ / _____
Shore _____ / _____	Other _____ / _____	Shore _____ / _____	Other _____ / _____

NOTES: _____

Conditions: _____

Issued by: _____

Date: _____

Permit #: _____

Census #: _____