

ZONING PERMIT, TOWN OF ST. GERMAIN, WI

(PRINT THIS INFORMATION)

Date applied: _____ Parcel County Computer #: _____ Permit Nbr: _____

Owner _____ Site Address _____

Gov. Lot #: _____ Lot #: _____ Section: _____ Town: 40N Range: _____ E. Zoning District: _____

Sub Division: _____

NOTICE!

- You must contact the St. Germain Zoning Administrator once setback measurements have been established, before construction begins: 715-542-3155
- You must contact Vilas County Zoning for a county permit: 715-479-3620

TO THE ZONING ADMINISTRATOR: The undersigned owner hereby applies for a permit to do work herein described and located on this application. The owner agrees that all work will comply with all St. Germain Zoning Ordinances, all other applicable ordinances of the Town of St. Germain, and with all laws of Vilas County and the State of Wisconsin applicable to said premises.

Upon approval of this application, the owner agrees that should a violation be found by the Zoning Administrator, said violation from the date of notification will, within 30 days be corrected at the owner's expense. Failure to do so may result in forfeitures defined in Chapter 1, Zoning, St. Germain Code of Ordinances.

Signed: _____ Owner or Agent

Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

Lot Size: _____ Building Size: 1) _____ 2) _____ Sq. Ft. Total _____

Construction to be: _____ Type of Construction: _____
(New, Addition, Moving, Alterations, Etc.) (Frame, Brick, Pre-fab, Manufactured home, Etc.)

Use: _____ Nbr. Bedrooms _____ Sanitation: _____ Well: _____

Type of Structure: _____ Nbr. Levels _____ Total Height: _____

Builder: _____

USE BACK SIDE OF THIS APPLICATION FOR SKETCH OF PROJECT

	ESTIMATED COST	FEES
Approved Plans Required? Yes No	Building: \$ _____	\$ _____
Vilas County Sanitary Permit Required? Yes No	Garage: \$ _____	\$ _____
If required, Sanitary #: _____	Deck/Porch: \$ _____	\$ _____
Travelway Permit #: _____ \$: _____	Permit Total \$ _____	
Fire #: _____ \$: _____	Application Approved: _____	20 _____
	Application Denied: _____	20 _____
	Signed: _____	Zoning Administrator

Remarks: Reason for Denial:	<p>St. Germain Zoning Administrator 561 Highway 155 St. Germain, WI 54558 Phone/ Fax: 715-542-3155 Hours: 6:00am—2:30pm Municipal Garage</p>
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UNDER PENALTY OF LAW, NO CONSTRUCTION IS TO BEGIN UNTIL PERMIT HAS BEEN APPROVED