

Zoning Permit Application Town of Mukwonago

Version: December 28, 2020

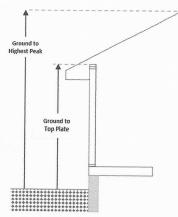
Town of Mukwonago W320 S8315 Beulah Road Mukwonago, WI 53149

Com

OFFICE USE ONLY								
Application Number:	Fee Paid: \$	Fee Received By:	Date Received:					
Parcel Number: Property Address: <u>\$93 \u2008 30575 (ty Rd NN</u>								
	Property Owner		Agent (if any)					
Name	Andy wegner		CANFIELD BUILDINGS					
Street address	593W30575 C	ty Rd.NN.	S66W27890 River Rd.					
City, state, zip code	MKWonago, W	I53149.	Wankesha, WI 53189					
D C	710 110 100							
Email address	wegnean @ m	asd.KI2.wi.us	_ office @ canfield buildings _ Z6Z-544-9230.					
General description of pro	oposed project: 4Z'X7.	5'x 13'-6" B	wilding For the Mukwongg					
Zoning Information Zoning District(s) (check a	till that apply) Setbacks a	and Offsets						
☐ C-1 Conservancy ☐ A-1 Agricultural	Front-yard	Front-yard setback: 80 feet from building foundation to base setback line (road right-of-way)						
☐ RH Rural home	Side-yard o	Side-yard offset: 51 feet from building foundation to West property boundary line						
☐ SE Suburban estate ☐ R-1 Residential	Side-yard o	Side-yard offset: 341.57 feet from building foundation to						
R-2 Residential	Rear-yard	Rear-yard offset: 500 Ploset from building foundation to 500+ property boundary line						
☐ B-2 Local business	EC setback	EC setback:feet from building foundation to Environmental Corridor District (if any)						
P-1 Public PUD:	C-1 setback	k: feet from building fo	oundation to Conservancy District (if any)					
☐ EC Environmental co	orridor (overlay)							
☐ HS Hydric soils (over								
For assistance in the zoning	districts please visit: https://towno	fmukwonago.zoninghub.com/	home.aspx					
Floor Area of Buildings (in s	square feet from exterior wall to ext	erior wall)						
	Existing	Prop	osed					
Principal building (first floor)			3150 sq. ft,					
Principal building (second flo	por)							
Attached garage								
Detached building (#1)								
Detached building (#2)								
	Total							
Sanitary Permit No. (Building	gs requiring sanitation only):							
New Building with a Baseme	ent							
Elevation of top of foundation		$858 \cdot 5$ (This should be shown on the grading plan.)						
Elevation of top of basement		(This should be shown of						
Elevation of top of footing	854	(This should be shown of	(This should be shown on the grading plan.)					
Elevation of seasonal high-w		The state of the s	(This is listed in the Seasonal High Groundwater Determination Report.)					
Note: The top of the basemer	nt floor must be one foot or more a	bove the seasonal high-water	table.					

Height of Proposed Building(s)

	Building 1		Building 2		Building 3	
	Ground to Top Plate	Ground to Highest Peak	Ground to	Ground to Highest Peak	Ground to	Ground to Highest Peak
Front	13-6"	22'				
Left	\ /	\ /	\longrightarrow		X	
Right	× /	<u>\</u>			/	_
Rear	× 1	<u> </u>		\rightarrow	/	_
		4	/		-	



Applicant certification

- I certify that all of the information in this application, along with any attachments, are true and correct to the best of my knowledge and belief.
- I understand that this application and any written materials relating to this application will become a permanent public record and that by submitting this application I acknowledge that I have no right to confidentiality. Any person has the right to obtain copies of such written materials or view it online.

7-3-24

I understand that the Zoning Administrator will review this application to determine if it contains all of the required information. If he or she
determines that the application is incomplete, it will not be scheduled for review until it is deemed to be complete.

Property Owner Signature(s):

Date: