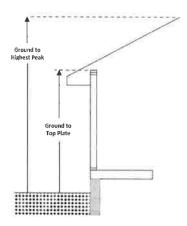


Town of Mukwonago W320 S8315 Beulah Road Mukwonago, WI 53149

OFFICE USE ONLY	11000 11000 4/16/26				
Application Number: Fee F	Paid: \$110.00 Fee Received By: K.Mullu Date Received: 4/15/25				
Parcel Number: 193599 700 3	Property Address: W31658550 County Rd EE				
Property Owr	ner Agent (if any) D W Wer				
Name Vande	11c Bill Van de Gogen				
Street address W3169	8550 County RA EE				
City, state, zip code \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	onago 53149				
Daytime telephone 425	195 75312,				
Email address Billy	an a icloud.com				
General description of proposed project:					
build a Pole	Barn on our 20 acres				
5120 05 Dr	1/2/1/2 DDX DX 900 54 Feel				
7 - in a lafarration					
Zoning Information Zoning District(s) (check all that apply)	Setbacks and Offsets				
C-1 Conservancy	Front-yard setback: feet from building foundation to base setback line (road right-of-way)				
A-1 Agricultural	Side-yard offset: feet from building foundation to property boundary line				
☐ RH Rural home ☐ SE Suburban estates					
R-1 Residential	Side-yard offset: feet from building foundation to property boundary line Rear-yard offset: feet from building foundation to property boundary line				
R-2 Residential					
☐ B-2 Local business ☐ P-1 Public	EC setback:feet from building foundation to Environmental Corridor District (if any)				
PUD:	C-1 setback: feet from building foundation to Conservancy District (if any)				
EC Environmental corridor (overlay)					
HS Hydric soils (overlay)	visit: https://townofmukwonago.zoninghub.com/home.aspx				
For assistance in the zoning districts please	VISIL https://dww.orindeworiago.zomingrido.com/norine.aspx				
Floor Area of Buildings (in square feet from					
	Existing Proposed				
Principal building (first floor)	· · · · · · · · · · · · · · · · · · ·				
Principal building (second floor)					
Attached garage					
Detached building (#1)	approx 30 pm				
Detached building (#2)	00				
То	tal				
Sanitary Permit No. (Buildings requiring sani	tation only):				
(
New Building with a Basement					
Elevation of top of foundation	(This should be shown on the grading plan.)				
Elevation of top of basement floor	(This should be shown on the grading plan.)				
Elevation of top of footing	(This should be shown on the grading plan.)				
Elevation of seasonal high-water table	(This is listed in the Seasonal High Groundwater Determination Report.)				
Note: The top of the basement floor must be	one foot or more above the seasonal high-water table.				

Height of Proposed Building(s)

3, 7	Building 1		Building 2		Building 3	
	Ground to Top Plate	Ground to Highest Peak	Ground to Top Plate	Ground to Highest Peak	Ground to Top Plate	Ground to Highest Peak
Front	12	1				1
Left	12	1				• X
Right	12	M	1 	-	-	
Rear	19	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.
- 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: •
(3') m	Ban 15 25
•	