



Zoning Permit Application Town of Mukwonago

Version: December 28, 2020

Town of Mukwonago
W320 S8315 Beulah Road
Mukwonago, WI 53149

OFFICE USE ONLY

Application Number: _____ Fee Paid: \$ _____ Fee Received By: _____ Date Received: _____

Parcel Number: MUKT1990001 Property Address: W332S9291 Red Brae Drive, Mukwonago, WI

	Property Owner	Agent (if any)
Name	<u>James O. and Ana F. Hughes</u>	<u>Heather Dukes of Dukes Law, PLLC</u>
Street address	<u>W332S9291 Red Brae Drive</u>	<u>5527 N. 25th Street</u>
City, state, zip code	<u>Mukwonago, WI 53149</u>	<u>Phoenix, AZ 85016</u>
Daytime telephone	_____	<u>602.320.8866</u>
Email address	_____	<u>hdukes@dukeslawaz.com</u>

General description of proposed project:

Request for Zoning Permit approval for a proposed community living arrangement use for up to 8 disabled residents within the S-E Suburban Estates Zoning District. The property is developed with an existing residence.

Zoning Information

Zoning District(s) (check all that apply)

- ☐ C-1 Conservancy
- ☐ A-1 Agricultural
- ☐ RH Rural home
- ☒ SE Suburban estates
- ☐ R-1 Residential
- ☐ R-2 Residential
- ☐ B-2 Local business
- ☐ P-1 Public
- ☐ PUD: _____
- ☒ EC Environmental corridor (overlay)
- ☐ HS Hydric soils (overlay)

Setbacks and Offsets

Front-yard setback: 70' feet from building foundation to base setback line (road right-of-way)
Side-yard offset: 180' feet from building foundation to west property boundary line
Side-yard offset: 150' feet from building foundation to east property boundary line
Rear-yard offset: 135' feet from building foundation to north property boundary line
EC setback: 0 feet from building foundation to Environmental Corridor District (if any)
C-1 setback: _____ feet from building foundation to Conservancy District (if any)

For assistance in the zoning districts please visit: <https://townofmukwonago.zoninghub.com/home.aspx>

Floor Area of Buildings (in square feet from exterior wall to exterior wall)

	Existing	Proposed
Principal building (first floor)	<u>2,716 s.f. (below grade)</u>	<u>N/A</u>
Principal building (second floor)	<u>3,662 s.f. (above grade)</u>	<u>N/A</u>
Attached garage	<u>7.5 garage parking spaces</u>	<u>N/A</u>
Detached building (#1)	<u>N/A</u>	<u>N/A</u>
Detached building (#2)	<u>N/A</u>	<u>N/A</u>
Total	<u>6,378 s.f.</u>	_____

Sanitary Permit No. (Buildings requiring sanitation only): _____

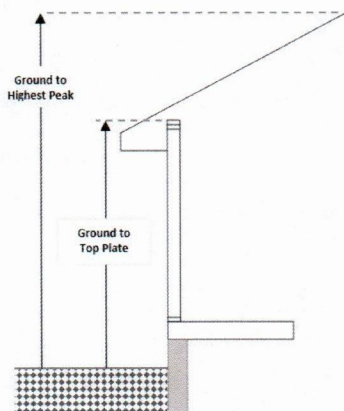
New Building with a Basement

Elevation of top of foundation	<u>N/A</u>	(This should be shown on the grading plan.)
Elevation of top of basement floor	<u>N/A</u>	(This should be shown on the grading plan.)
Elevation of top of footing	<u>N/A</u>	(This should be shown on the grading plan.)
Elevation of seasonal high-water table	<u>N/A</u>	(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)

	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	N/A	N/A				
Left	N/A	N/A				
Right	N/A	N/A				
Rear	N/A	N/A				



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): Authorized Agent Date: 12/10/25
Hunter Dine ESO
Hunter Dukes ESO