

CITY OF WEYAUWEGA
109 E. Main P.O. Box 578
Weyauwega, WI 54983

Application No. _____ Fee _____

APPLICATION for Building, Zoning, and Occupancy Permit in the City of Weyauwega, WI
Box 578, 54983

Owner's Name _____ Telephone # _____

Owners Address _____

Building Site Address (if different) _____

Owner's Agent : Name and Address _____

General Contractor _____ Telephone # _____

PROPERTY DESCRIPTION: Tax/property number _____

Subdivision _____ Block # _____ Lot(s) _____

If a metes and bounds property description, attach copy of legal description
Surveyors Name _____

ZONING DISTRICT: ___ Residential A ___ Residential B ___ Commercial
Check One:

___ Industrial A ___ Industrial B
Number of Dwelling Units (if any) _____

Description of Work Planned: _____

CONSTRUCTION SPECIFICATIONS: Length _____ Width _____ Square Feet _____

Type of : Foundation wall _____ Roof Material _____

Height of Structure _____ Number of Stories _____

ESTIMATED TOTAL COST TO COMPLETE PROJECT \$ _____ Start Date _____

The undersigned hereby applies for a permit to do work according to the above description and the specifications submitted herewith. The undersigned agrees that such work will be done as described, and that it will comply with all applicable State of Wisconsin requirements, including but not limited to the Wisconsin One and Two Family Dwelling code, and ordinances of the City of Weyauwega, Wisconsin.

Applicant Signature: _____ Date _____

Zoning Permit Approved by: _____ Date _____

Building Permit Approved by: _____ Date _____

Application Denied: Reason _____ Date _____

Variance Applied For: _____ Date _____

Zoning Board of Appeals Decision _____ Date _____

RESIDENTIAL "A" Zone
(Measure from lot line)
Setback 25'
Rearyard 25'
Sideyard 25' total, not less than
10' one side,

DIAGRAM OF CONSTRUCTION

Fill in Dimensions
And Locate Accessory Buildings

