

Owner Last Name \_\_\_\_\_  
First Name \_\_\_\_\_  
Property Desc. \_\_\_\_\_  
Tax Parcel # \_\_\_\_\_  
Town \_\_\_\_\_  
Number of acres \_\_\_\_\_  
Subdiv. \_\_\_\_\_  
Block \_\_\_\_\_  
E Lot \_\_\_\_\_  
N, R \_\_\_\_\_  
T \_\_\_\_\_  
1/4, Sec. \_\_\_\_\_  
1/4 \_\_\_\_\_  
GL \_\_\_\_\_

Fee: \$ \_\_\_\_\_ Receipt Number: \_\_\_\_\_ Permit Number: \_\_\_\_\_

### TOWN OF PINE RIVER LAND USE APPLICATION

To the Zoning Administrator: The undersigned hereby makes application for a Land Use Permit for the work described and located as shown herein. The undersigned agrees that all work shall be done in accordance with the requirements of the Town of Pine River Zoning Ordinances, with all other applicable County Ordinances, and the laws and regulations of the State of Wisconsin. I declare that the information that I am supplying is true and accurate to the best of my knowledge and I acknowledge that this information will be relied upon for the issuance of this permit. By signing this application, I am also granting permission to the Zoning Administrator and Building Inspector to enter my property at any reasonable time for the purpose of inspection to assure compliance with the zoning laws related to the issuance of this permit.

#### Please list all NEW structures you wish covered by this permit:

WORK IS:	TYPE	and	SIZE	of	STRUCTURE:
( ) New Principal Structure	( ) Home	_____	x	( ) Garage	_____ x
( ) New Accessory or Addition	( ) Porch	_____	x	( ) Storage Building	_____ x
( ) Commercial	( ) Deck	_____	x	( ) Farm Building	_____ x
( ) Other _____	( ) Addition	_____	x	( ) Other	_____ x

Explain "addition": \_\_\_\_\_ Explain "other": \_\_\_\_\_

**HOME IS:** **ARE ACTIVITIES LOCATED IN SHORELAND:** ( ) No ( ) Yes, \_\_\_\_\_  
( ) Seasonal note: Shoreland is anything located within 1,000' of a \_\_\_\_\_ (name of water body)  
( ) Year Around lake or flowage or 300' of a river or a navigable stream, whether water body is on your property or not.

**TYPE OF CONSTRUCTION:**  
( ) Frame/Modular Home ( ) Mobile/Mfg Home & year built \_\_\_\_\_ ( ) Other \_\_\_\_\_

**FOUNDATION:** ( ) Below Grade Basement ( ) Walk-out Basement ( ) Slab ( ) Other \_\_\_\_\_

<b>CONSTRUCTION DETAILS:</b> New livable area _____ sq. ft. Existing livable area _____ sq. ft.	Number of bedrooms _____ If addition, number of bedrooms added _____	<b>PROPERTY ADDRESS:</b> ( ) None (you must apply for one) ( ) Yes Number _____ Road name _____
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Is this property: ( ) Forest Crop/MFL Is there any: ( ) Floodplain, if so, Elevation: \_\_\_\_\_ ( ) Wetland

**ZONING DESIGNATION:** (office use): \_\_\_\_\_

**OTHER PERMITS REQUIRED:**  
( ) Sanitary # \_\_\_\_\_  
( ) Conditional Use # \_\_\_\_\_  
( ) Variance # \_\_\_\_\_  
( ) Other \_\_\_\_\_

**Complete detailed PLOT PLAN drawing on back showing all items listed. ALL structures under permit must be shown on the drawing and must be STAKED OUT ON BUILDING SITE BEFORE submitting Land Use Application.**

**OWNER IS RESPONSIBLE TO CONTACT OTHER AGENCIES IN CASE OTHER PERMITS ARE REQUIRED.**  
Owners Name: \_\_\_\_\_ Builder: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Daytime Phone: ( ) \_\_\_\_\_ Builder's Phone: ( ) \_\_\_\_\_  
Required Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTICE: ALL LAND USE PERMITS EXPIRE TWO (2) YEARS FROM THE DATE ISSUED.**  
For the construction of new one & two family dwellings, the Town of Pine River is required by the State of Wisconsin to issue building permits which enforce the Uniform Dwelling Code. YOU MUST CONTACT THE TOWN OF PINE RIVER BUILDING INSPECTOR FOR MORE INFORMATION.

**ACTION:** FOR OFFICE USE ONLY  
Date Permit Issued: \_\_\_\_\_ Signed: \_\_\_\_\_  
Date Permit Denied: \_\_\_\_\_ Reason: \_\_\_\_\_  
Comments or Conditions: \_\_\_\_\_

**PLOT PLAN DRAWING**

A detailed drawing of the plot **MUST** be provided. Include **ALL** of the required information on the drawing. If the parcel has a Certified Survey Map, please attach a copy. Incomplete applications will be returned.

1. Shape of parcel, include all lot line dimensions.
2. Indicate **NORTH**.
3. Show the location and names of all surrounding roads and highways.
4. Show the location and names of all area water bodies (lakes, rivers, creeks, ponds, etc...)
5. Indicate any wetlands or floodplains on property.
6. Show the location of the **NEW** construction on the parcel. Include the following measurements:
  - a. distance from the centerline of any and all roads.
  - b. distance from the right-of-way of any and all roads.
  - c. distance to all lot lines.
  - d. distance to any and all water bodies.
7. Indicate **ALL** other existing buildings on parcel with "EB".
8. Indicate distance from septic tank or holding tank to proposed construction.
9. Indicate distance from sewage system drain field to proposed construction.
10. Indicate distance from well to proposed construction.
11. IF on water, indicate view corridor clearing within the shoreline buffer zone.

All **NEW** structures and lot lines **MUST** be **STAKED & FLAGGED BEFORE ZONING ADMINISTRATOR'S ON-SITE VISIT**, which can occur anytime after this application is submitted. If setbacks cannot be confirmed, it will delay issuing the permit.

**NOTE:** Wisconsin State Statutes Chapter 145.195(1) prohibits the issuance of a Land Use Permit for construction of any structure requiring connection to a private on-site wastewater treatment system unless an approved system satisfying all applicable regulations already exists to serve the proposed structure or all permits for installation of one have been obtained.

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**FOR OFFICE USE ONLY**

Inspection Record: \_\_\_\_\_

Comments: \_\_\_\_\_

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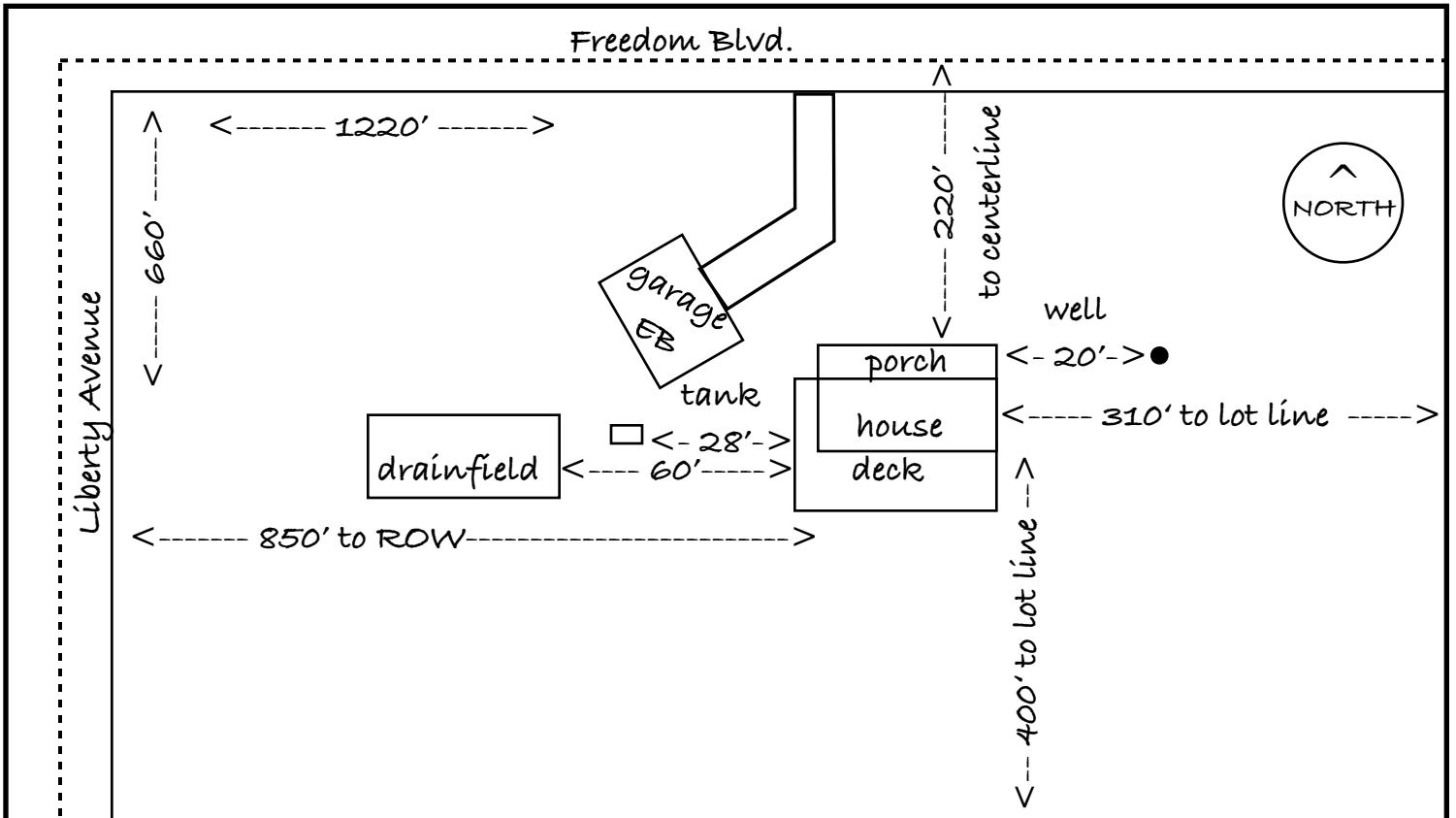
**NO CONSTRUCTION SHALL BEGIN UNTIL A LAND USE PERMIT HAS BEEN ISSUED**

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