

PERMIT NUMBER  
\_\_\_\_\_

# TOWN OF ATHELSTANE

## BUILDING PERMIT APPLICATION

Complete in black or blue ink only

Permit fee: \$75.00  
After the fact permit fee: \$300.00  
Make checks payable to:  
Town of Athelstane  
Mail to:  
Town of Athelstane  
PO Box 11  
Athelstane, WI 54104

### PERSONAL INFORMATION

Owner's last name:		First:	Middle Initial:
Address:			
City:	State:	Zip:	
Telephone number:	E-mail:		
Name of Contractor:			
Address:			
City:	State:	Zip:	
Telephone number:	E-mail:		

### PROPERTY INFORMATION

1/4	1/4	Section:	Town:	North	Range	East
Government Lot Number:			Parcel Number:			
Lot Number:			Block Number:			
Subdivision Name or C,S.M. Number:						
Physical Address:						

### GENERAL CONSTRUCTION INFORMATION

<input type="radio"/> Use: Single Family-Number of occupants _____ Commercial-Number of employees _____ <input type="radio"/> Multiple Family-Number of occupants _____ Accessory (garage, shed, deck, etc.) _____	
Marinette County Shoreland Zoning:  <input type="radio"/> Zoning Permit Number _____ <input type="radio"/> N/A	Sanitary system: <input type="radio"/> Sanitary Permit Number _____ <input type="radio"/> Non-Plumbing Permit Number _____ <input type="radio"/> N/A

Be advised that other permits may be required from the following:

Marinette County Land Information Department: Zoning (if the proposed structure is located within 1000 feet of a flowage or lake or within 300 feet of a river, creek or stream), Sanitary or Non-plumbing

Marinette County Highway Department: Driveway (if located on County Highway or State Highway) W.D.N.R.: Wetland Fills, Excavation greater than 10,000'square feet, pond excavation within 500 feet of waterway

I am aware of the Town of Athelstane Ordinance (s) that pertain to my project. (initial)

Present use of property:	<input type="radio"/> Residential (permanent occupancy)	<input type="radio"/> Residential (seasonal)
	<input type="radio"/> Commercial	<input type="radio"/> Agricultural
	<input type="radio"/> Industrial	<input type="radio"/> Other
Proposed use of property:	<input type="radio"/> Residential (permanent occupancy)	<input type="radio"/> Residential (seasonal)
	<input type="radio"/> Commercial	<input type="radio"/> Agricultural
	<input type="radio"/> Industrial	<input type="radio"/> Other
Inhabited dwelling:	<input type="radio"/> No	<input type="radio"/> Yes

Summarize Project(s):

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07/21/2022

## IDENTIFY PROPOSED PROJECTS

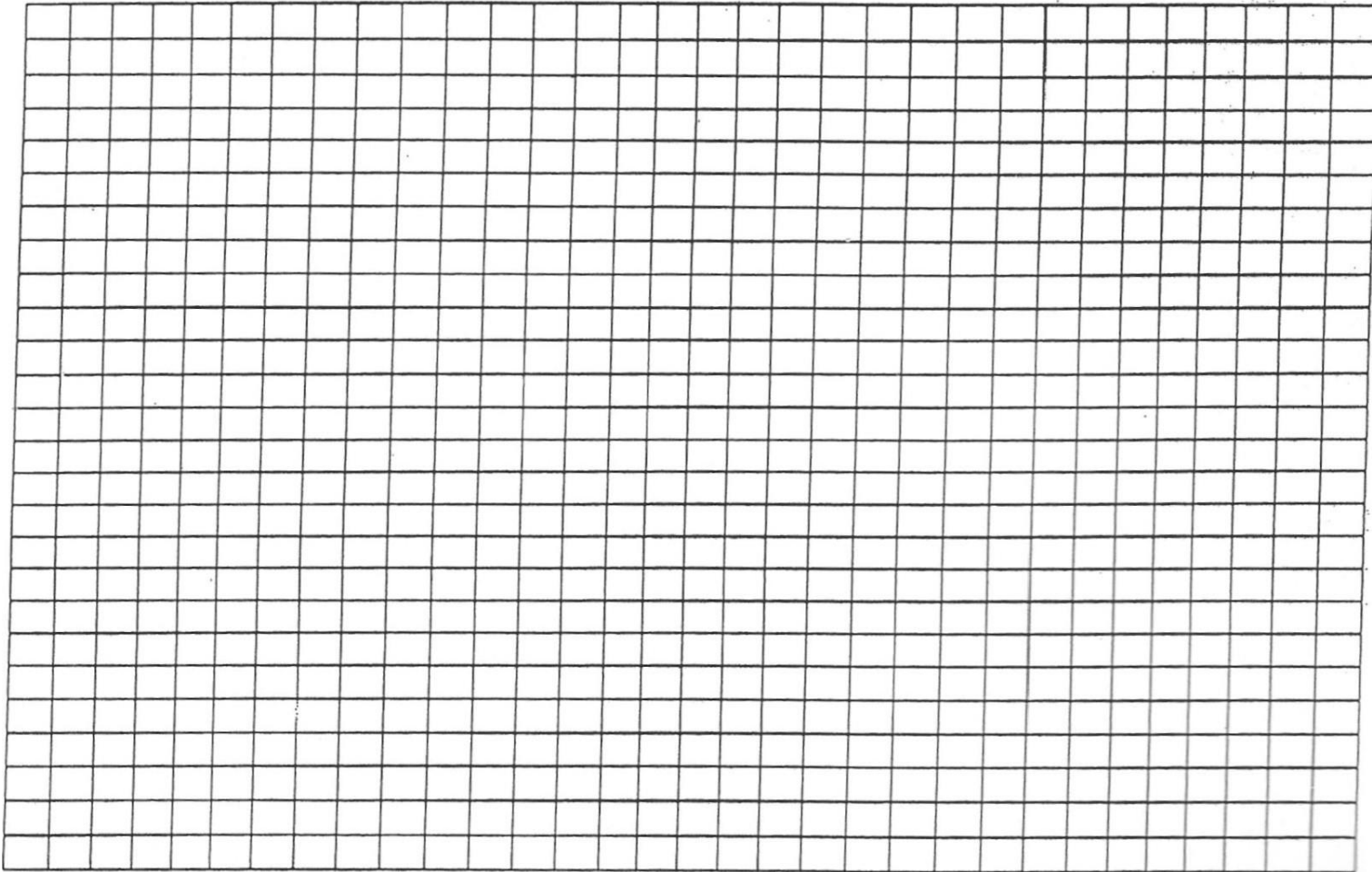
Project 1 Description:		
Building Dimensions: Length: _____ Width: _____ Square feet of foot print _____	Foundation: <input type="radio"/> Basement (no walkout) <input type="radio"/> Basement (with walkout) <input type="radio"/> Crawl space <span style="float: right;"><input type="radio"/> Slab</span> <input type="radio"/> Other (specify) _____	
List the closest distance in feet from the structure to the following:		
Centerline of road	Right-of-Way	Lot lines
Project 2 Description:		
Building Dimensions: Length: _____ Width: _____ Square feet of foot print _____	Foundation: <input type="radio"/> Basement (no walkout) <input type="radio"/> Basement (with walkout) <input type="radio"/> Crawl space <span style="float: right;"><input type="radio"/> Slab</span> <input type="radio"/> Other (specify) _____	
List the closest distance in feet from the structure to the following:		
Centerline of road	Right-Of-Way	Lot lines
Project 3 Description:		
Building Dimensions: Length: _____ Width: _____ Square feet of foot print _____	Foundation: <input type="radio"/> Basement (no walkout) <input type="radio"/> Basement (with walkout) <input type="radio"/> Crawl space <span style="float: right;"><input type="radio"/> Slab</span> <input type="radio"/> Other (specify) _____	
List the closest distance in feet from the structure to the following:		
Centerline of road _____	Right-of-Way _____	Lot lines _____
Project 4 Description:		
Building Dimensions: Length: _____ Width: _____ Square feet of foot print _____	Foundation: <input type="radio"/> Basement (no walkout) <input type="radio"/> Basement (with walkout) <input type="radio"/> Crawl space <span style="float: right;"><input type="radio"/> Slab</span> <input type="radio"/> Other (specify) _____	
List the closest distance in feet from the structure to the following:		
Centerline of road	Right-Of-Way	Lot lines

Provide a scaled or dimensioned drawing on page 3 of this application of the boundaries of the property, including all existing and proposed structures as follows:

1. Show property lines with dimensions.
2. Show all roads and their names.
3. Show dimensions of all existing and proposed structures,
4. Show distances from all existing and proposed structures to; lot lines, right-of-way, centerline of adjacent roads.

Revision date: 7/21/2022

Drawings must be accurate and drawn to scale or dimensioned (indicate north with arrow)



**BUILDING PERMIT EXPIRATION:** This Building Permit shall expire eighteen months from the date of issuance and shall be renewed unless the proposed work has been completed.

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**SECTION 3 - SETBACKS**

- A. The minimum setback for buildings, decks or porches shall be seventy-five (75) feet from the centerline of any Town or County Road.
- B. The minimum setback for buildings, decks, porches shall be fifteen (15) feet from all side and rear lot lines.
- C. The overhang of any structure shall be the point from which the setback shall be measured.
- D. Fences are exempt from the fifteen (15) foot setback from the back and side property lines.

The applicant gives the Town of Athelstane Town Board, or their designee, permission to enter my property to check compliance to this permit. (By Appointment ONLY)

Building Permit Fee:	\$ 75.00	_____
New Fire Number Fee:	\$ 50.00	_____
Driveway Permit Fee:	\$ 25.00	_____
After the Fact Building Permit Fee:	\$300.00	_____
<b>Total:</b>		_____
		_____

Permit Fee Paid By: Cash \_\_\_\_\_ Check \_\_\_\_\_ (X) one

**APPLICANTS CERTIFICATION:**

The undersigned hereby applies for a permit to do work according to the above description and plot plans submitted herewith. The undersigned agrees that such work will be done as described and that it will comply with all applicable Statutes of Wisconsin, the Shore land /Wetland, Flood plain and Sanitary Codes of Marinette County and the Building Codes of the Town of Athelstane. The undersigned acknowledges that he/she has fully read and understands the entire Building Permit Application.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/ 20  
 Date: \_\_\_\_/\_\_\_\_/ 20 \_\_\_\_\_ By: \_\_\_\_\_ Designee

**OFFICE USE ONLY**

Remarks and/or conditions of issuance:	
Granted by: _____	Issued date:
Town of Athelstane Chairperson or Designee	Expiration date:

