

CITY OF BAYFIELD

ZONING PERMIT APPLICATION

Submit a site plan for your project providing all relevant dimensions (including land area), setbacks, distances from existing structures, and any additional requirements specified by the zoning administrator when returning this completed application.

For Office Use Only		
Permit # _____	Received _____	Issued _____

Zoning Category	Project Classification (check all that apply)		
<input type="checkbox"/> R-1 Residential	<input type="checkbox"/> Single-family dwelling	<input type="checkbox"/> Addition to existing building	
<input type="checkbox"/> R-2 Multifamily Residential	<input type="checkbox"/> Multiple-family dwelling	<input type="checkbox"/> Garage	
<input type="checkbox"/> C-1 Commercial	<input type="checkbox"/> Commercial	<input type="checkbox"/> Accessory dwelling unit	
<input type="checkbox"/> W-1 Conservancy	<input type="checkbox"/> Mixed-use/other	<input type="checkbox"/> Deck	
<input type="checkbox"/> W-2/C-1 Waterfront	<input type="checkbox"/> Remodel		
<input type="checkbox"/> Planned Development District	<input type="checkbox"/> Lodging		
Additional Permit Applications Needed (refer to instructions)			
<input type="checkbox"/> Fence	<input type="checkbox"/> Sign	<input type="checkbox"/> Conditional Use	
<input type="checkbox"/> Sidewalk	<input type="checkbox"/> Driveway	<input type="checkbox"/> Certificate of Appropriateness	

Property Owner Information			
Name _____			
Last	First	Middle	
Mailing Address _____			
City _____	State _____	ZIP _____	
Phone _____	Email _____		

Contractor Information	
Business Name _____	
DBA Name (if applicable) _____	
Principal Contact _____	State License No. (if applicable) _____
Phone _____	Email _____

Project Information (continued on next page)			
Site Address _____	Block _____	Lot _____	Tax ID _____
Cost (omit cents)	Principal Type of Frame		
Cost of Improvement \$ _____	<input type="checkbox"/> Masonry (wall bearing)		
<i>To be installed but not included in the above cost:</i>			
Electrical \$ _____	<input type="checkbox"/> Wood frame		
Plumbing \$ _____	<input type="checkbox"/> Structural steel		
Heating, air conditioning \$ _____	<input type="checkbox"/> Reinforced concrete		
Other (elevator, etc.) \$ _____	<input type="checkbox"/> Other: _____		
Total Cost \$ _____			

Project Information (continued from previous page)	
Estimated Start Date _____	Residential Buildings Only Number of Bedrooms _____
Estimated Completion Date _____	
Commercial Buildings Only Number of Employees _____	Number of Bathrooms: Full _____ Partial _____
Project Description: Please provide a clear description of existing conditions and proposed work, including changes in use, building size, height, parking, access, or exterior appearance. _____ _____ _____ _____	

Acknowledgements (initial each)

_____ I understand that I am responsible for securing any required building or occupancy permits and arranging for inspections from Bayfield County and/or another relevant agency if applicable.

_____ I understand that the property owner or a representative must attend the Plan Commission meeting and/or another meeting if their approval is required.

_____ I certify that the information provided is accurate and complete and acknowledge that construction may not begin until all required permits and approvals have been issued.

Owner/Agent Signature _____ **Date** _____

Instructions
<p><u>General</u></p> <p>This form may be submitted via email, in person, or by mail, and payment can be made on the City website or by check. The City has a basic template available for you to provide dimensions such as land area and setbacks if you have a simple project. You are not required to use this template. You must provide elevation drawings to scale. A survey is required for any projects where lot lines or setbacks are questionable as determined by the zoning administrator or if they otherwise request one.</p> <p><u>Additional Permit Applications</u></p> <p>These applications are only required if applicable to your project, and there are separate application forms for them. A <i>certificate of appropriateness</i> is only required for historic structures, historic sites, or projects in historic districts as designated by the Historic Preservation Commission. <i>“Driveway permits”</i> are considered a street excavation permit. Additional permits may be required for the construction process, such as digging or erosion control. If you have any questions on what permits are required, please reach out to the City’s zoning administrator for guidance.</p>

For Office Use Only

Zoning Administrator Review

Date Completed Application Received _____ Fee _____ Date Fee Paid _____

Project Plan Received

Recommends Permit Be: **Approved** **Denied**

Recommendation Statement _____

Zoning Administrator Signature _____

Plan Commission Review

Meeting Date _____ Date of First Class 2 Insertion _____

Recommends Permit Be: **Approved** **Denied**

Recommendation Statement _____

Plan Commission Chair Signature _____

Common Council Review

Meeting Date _____ Date of First Class 2 Insertion _____ Date Notices Mailed _____

Permit Is: **Approved** **Denied**

Recommendation Statement _____

Mayor Signature _____