

**TOWN OF ATHELSTANE
P.O. Box 11
Athelstane WI 54104**

BUILDING PERMIT APPLICATION

The undersigned hereby applies for a permit to do work herein described and located as shown on this application. The undersigned agrees that all work will be done in accordance with the ordinances of the Town of Athelstane and with all laws applicable to said premises.

Permit cost: \$40.00

This application and terms and of proposed permit agrees to:

Applicant Name _____ (type or print)
Address _____ (home)
State _____ Zip _____ Phone No. (_____) _____ - _____
Property Address: _____ Parcel Number _____
Road _____

Fire Number needed? Yes ___ No ___ (X) one Fire # _____

WELL - SEPTIC - PRIVY (Sanitary Permit required from Marinette County prior to obtaining a building permit from the Town of Athelstane.

Marinette County Sanitary Permit? YES ___ NO ___ (X) one

Well Permit: YES ___ NO ___ N/A ___ (X) one
Privy Permit: YES ___ NO ___ N/A ___ (X) one
Septic Permit: YES ___ NO ___ N/A ___ (X) one

ORDINANCE # 1

Dwelling (minimum size: 576 sq. ft.)

(Any building that is used as shelter or for sleeping is consider a dwelling)

Mobile/Manufactured Homes (minimum size 576 sq. ft.) (Must be on a cement slab with hurricane tie downs or crawl space or basement anchored)

ALL of the above items are required by Wis. Stat. to have a **WI Uniform Permit**

Building Permit Required:

(X) ALL applicable

- * House: _____
 - * Mobile home: _____ (Footing inspection)
 - * Mobile home: _____ (ALL Used Mobile & Manufactured Homes: Shall be required to have a licensed Building Inspection Report before moving into Athelstane Township)
 - * Double wide: _____ (New Electrical hook ups, Crawl space, and basements
 - * Triple wide _____ to be inspected.)
 - * Modular homes: _____
 - Additions: _____
 - Garages: _____
 - Sheds: _____
 - Decks: _____
 - Remodeling (exterior)
 - New Electrical Entrance Service: ON _____ Building _____ Post (X) one
 - Raze
 - Remove
- Re Roofing (Permit not required)**

* **WI Uniform Permit as required by State Code. (Noted by *)**

Town of Athelstane Building: Permit required before applying for the **WI Uniform Permit as required by State Code.**

Is there another dwelling on this parcel: Yes _____ No _____ (X) one

IF you are building a garage or shed do you intend to live in it? Yes _____ No _____ (X) one

There is **ONLY (1)** dwelling allowed per parcel. By: (Ordinance. # 1)

This Permit is issued with the above knowledge that **ONLY 1** dwelling will remain on this parcel. The other dwelling shall be removed within 30 days after completion of the project, or at the end of the building permit expiration date. (18 months from day of application.) **Extensions** will **ONLY** be granted in writing by Town of Athelstane Town Board.

DWELLING: Is defined as any room or group of rooms forming a single habitable unit with facilities that are used for or intended to be used for living, sleeping, cooking, and eating.

This Permit is good for ONLY 18 months.

If the project listed on the Permit is NOT complete in this period of 18 months, another Permit shall be required.

Set backs:

75 Feet: From the center line of any roadway.

15 Feet: From any side or back lot lines.

DRIVEWAYS PERMIT: ____ Yes ____ No ____ N/A(X) one \$ 25.00

(See Driveway Permit Application)

CULVERTS: (Min. Width 24ft.) Town of Athelstane maintenance crew will assist with proper location, size and length. (See Driveway Permit Application)

ORDINANCE # 5

Shore land Parcels: 3 acres minimum, structures within 1,000 feet of lake, stream or river are required to have a **Marinette County Zoning Permit**

Off water Parcels: 3 acres minimum

If your Parcel was created before Nov. 16, 2000, and does not meet the minimum lot size requirement NOW, You will be able to build on your parcel. (Proof required)

North is which direction? ↑ ↓ ← → (Circle one)
Road name and center line of road

Draw a site plan

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.

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

Building Permit Fee: \$40.00 _____
New Fire Number Fee: \$50.00 _____
Driveway Permit Fee: \$25.00 _____
After the Fact Building Permit Fee: \$200.00 _____
(5 times the amount of the Building
Permit Fee)
Total: _____

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 Sign: _____ Date: ____/____/20____

Date: ____/____/20____ **By:** _____ **Designee**