Town of Germantown Zoning Compliance Permit Requirements - FOR ALL CONSTRUCTION PROJECTS -

Application for Zoning Compliance Permits must be filed with the Town Zoning Administrator on forms furnished by the Town of Germantown. The Zoning Administrator shall act on the application within fourteen (14) calendar days following its receipt. If the application is rejected, the applicant will be notified, in writing, stating the reason(s) for rejection. A copy of the rejection notice shall be delivered to the Town Clerk and the Chairperson of the Zoning Board of Appeals.

An application for a building permit must be accompanied by:

- A. A site plan showing the location of the building, structure, or dwelling to be placed on the lot, plus any existing buildings or structures, well and/or septic system on the property and driveway from the street or road edge to its termination, all with respect to property lines and in correct relation to each other, in scale or in size dimensions.
- B. Proof of ownership i.e. copy of deed or tax bill.
- C. A valid Juneau County Sanitary and/or Shoreland Zoning Permit must be presented to the Zoning Administrator prior to issuance of a Zoning Compliance Permit for a dwelling, structure, or commercial building.
- D. A Zoning Compliance Permit for a dwelling will NOT be issued for dwellings with less than 816 square feet on the ground level.

NOTES:

Building setbacks are as follows: 10 feet from side lot line

30 feet from back lot line

30 feet from front lot line (or 63 feet from the center line of the road*)

*Those who live on private roads should **NOT** use the center of the road as a reference point. They should only use their surveyed lot lines.

The Zoning Compliance Permit is **NOT** a building permit. A Zoning Compliance Permit must be issued **BEFORE** you can apply for a building permit with the Building Inspector.

Town of Germantown

Updated Fee Schedule as approved by Town Board 10-10-2023

Highlighted area of page 1 only

DOCUMENT MENU:
Fees Not Related to Ordinances
Fees Relating to Ordinances

FEES NOT RELATED TO ORDINANCES

Copying and Open Record Fees

Regular \$ 0.50 per page (plus postage if mailed)

Thumb Drive copies \$10.00 per thumb drive (plus postage if mailed)

Email (Electronic) copies \$ 0.20 per page Fax – to send and/or receive \$ 1.00 per page

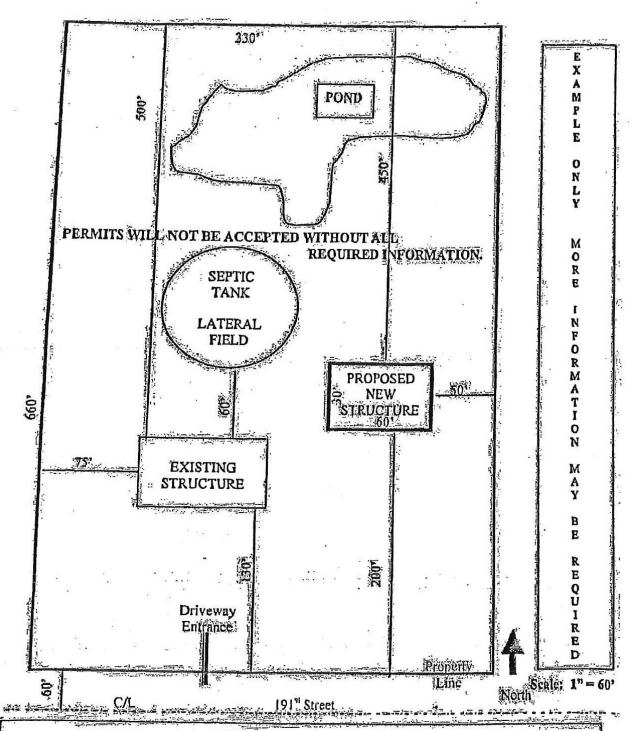
Cost of locating \$ 35.00 per hr with 1 hr minimum (plus postage if mailed)

X7	Φ1.50.00
Vacate of Public Way	\$150.00
Demolition Permit	\$75.00
Driveway permit -includes initial fire number sign,	\$100.00
post, and installation	
Replacement Fire number sign: post, sign, and	\$100.00
installation if damaged or destroyed	
Conditional use	\$200.00
Certificate of Zoning Compliance -up to 815 sq ft	\$100.00
Certificate of Zoning Compliance -816 sq ft or more	\$200.00
Certificate of Zoning Compliance – New Home	\$400.00
Non living space addition, i.e., carports, decks,	\$75.00
roofs over manufactured homes, open porches, etc.	
Fence Permit	\$75.00
Pool Permit	\$200.00
Motel (each living unit)	\$100.00
Multi-family building, i.e.: condominium per unit	200.00
Rezoning Amendment	\$200.00
Variance/Administration Appeal	\$200.00
Planned Unit Development	\$1200.00
Preliminary Plat / Final Plat	\$300.00 + \$10 per lot
Planned Unit Development Revisions	\$750.00
Site Plan Review	\$400.00
Impact Fee	\$855.89
Special Dwelling Permit (Refundable)	\$1000.00
Moving Permit (per structure)	\$500.00
Publishing a notice	Actual cost
Special Assessment Letter	\$40.00
Brush dump permit fee -Residential 2024	\$25.00
Brush dump permit fee – Residential 2 nd vehicle 2024	\$5.00
Brush Dump permit fee -Commercial 2024	\$250.00

APPLICATION FOR DRIVEWAY ACCESS PERMIT TOWN OF GERMANTOWN JUNEAU COUNTY, WISCONSIN

The undersigned hereby applies for a Driveway Access Permit for the premises described herein. The undersigned agrees that all construction shall be performed in accordance with the specifications of Ordinance #4, Section 6, and all other applicable Town Ordinances and the Laws and Regulation of the State Of Wisconsin.

Applicant or Agent	
Permanent Address	
Telephone Number	
Owner of Site	
Address	
Contractor	
Address	
Phone Number	
Address of Premises Affected	
Lot # Subdivision/PUD	
Attachments:	
The following required items shall be attached to this Application:	
1. A Scaled Site Plan or Plat of Survey.	
2. Copy of the Title Report or Deed showing proof of property ownership	
THE CONCERNICATION OF THIS DRIVEWAY WILL BE THE RESPONSIBILITY OF THE RESPONSI	OWN ROAD DURING
THE CONSTRUCTION OF THIS DRIVEWAY WILL BE THE RESPONSIBILITY OF THE PROPERTY Applicant's Verification of Information:	
Applicant's Verification of Information:	OWNER.
Applicant's Verification of Information: I hereby certify that all the above statements and attachments submitted hereto are true a	OWNER.
Applicant's Verification of Information:	OWNER.
Applicant's Verification of Information: I hereby certify that all the above statements and attachments submitted hereto are true a of my knowledge and belief.	OWNER.
Applicant's Verification of Information: I hereby certify that all the above statements and attachments submitted hereto are true of my knowledge and belief. Owner Signature	OWNER.
Applicant's Verification of Information: I hereby certify that all the above statements and attachments submitted hereto are true a of my knowledge and belief. Owner	OWNER.
Applicant's Verification of Information: I hereby certify that all the above statements and attachments submitted hereto are true a of my knowledge and belief. Owner	YOWNER. and correct to the best
Applicant's Verification of Information: I hereby certify that all the above statements and attachments submitted hereto are true a of my knowledge and belief. Owner	YOWNER. and correct to the best
Applicant's Verification of Information: I hereby certify that all the above statements and attachments submitted hereto are true a of my knowledge and belief. Owner	YOWNER. and correct to the best
Applicant's Verification of Information: I hereby certify that all the above statements and attachments submitted hereto are true as of my knowledge and belief. Owner	YOWNER. and correct to the best
Applicant's Verification of Information: I hereby certify that all the above statements and attachments submitted hereto are true a of my knowledge and belief. Owner	YOWNER. and correct to the best



EXAMPLE SITE PLAN

NOTE ALL MEASUREMENTS IDENTIFIED ON THIS EXAMPLE SHOULD APPEAR ON THE SUBMITTED SITE PLAN MUST BE DRAWN TO SCALE.

SUBMITTI	ED SITE PLAN. <u>"THE SUBMITTED SITE PLANMUST BE DR</u>	AWN TO SCAL
ALL MEAS	SUREMENTS MUST BE TO SCALE	Nagazara (Santa)
Please indicate:	The location of all existing and proposed buildings/structures.	
	The distance from each structure to nearest property line.	
	The distance from centerline of adjacent street to property lines.	
•	The scale used to draw the Site Plan.	

O'DELL'S BAY SANITARY DISTRICT #1 N7832 LAKE VIEW COURT NEW LISBON, WI 53950

PH: 608-562-3880 FAX: 608-562-3881

To: All "Unconnected" Members of O'Dell's Bay Sanitary District #1

Subject: Connection Procedure and Fee

This procedure and one time fee apply at the time any new building or home is scheduled for connection to the Sanitary District system. The procedure allows us to better manage the connection process and to ensure that all connections are accomplished in an efficient and consistent manner without any related cost to the District. It is intended to be mutually advantageous to the property owner, the plumbing contractor and the District.

Our connection Procedure and Fee Schedule is as follows:

*Prior to the desired timing of a new connection, it is mandatory that the Sanitary District Office be contacted with a preferable 1-2 weeks' notice either by phone (562-3880) or by letter. At least 5 business days advance notice is required to avoid inadvertent delays; if less is provided, an additional \$50.00 will be charged. The District will arrange for the building contractor and/or plumbing firm involved to contact our licensed sanitary system operator to schedule a firm date for the connection. Connections will be scheduled for a Wednesday, with our operator present to advise and oversee the entire process. This will include the opening, and replacement if necessary, of the curb stop valve as well as the possible need to open other valves in the system's main lines. If a curb stop valve must be replaced, our engineer will advise the Plumber as to type of valve approved by the District. It should be noted that in Half Moon Bay any existing "plastic" valves must be replaced with an approved brass valve. Upon completion of the work, our engineer will certify and notify the District that the connection process has been satisfactorily accomplished. The property owner's status will then immediately change from "unconnected" to "connected" with the annual usage fee revised accordingly.

- *The O'Dell's Bay pumping system was designed using a hydraulic computer model which is based on the E-One grinder pump. While there may be other pumps that could be substituted, the system was not hydraulically modelled using another pump, and therefore, the District cannot verify proper pump performance using a different pump manufacturer. The District recommends all sewer system connections are made using the E-One IH091, one (1) horsepower grinder pump with the Protect Panel.
- *All connections must be handled by, or under the direct supervision of a plumber licensed in the State of Wisconsin.
- *The District will assess the property owner a one-time \$200.00 connection fee to offset expenses involved, providing the hook-up is done on a regularly scheduled date. If an alternate date must be scheduled for connection other than a Wednesday, an additional \$150.00 charge will be added to that fee.

Thank you in advance for your cooperation and assistance.

O'Dell's Bay Sanitary District #1, Board of Commissioners

APPLICATION FOR CONDITIONAL USE PERMIT OR CERTIFICATE OF ZONING COMPLIANCE TOWN OF GERMANTOWN, JUNEAU COUNTY, WISCONSIN

The undersigned hereby ap	oplies for a:		
	Conditional Use Permit Certificate of Zoning Cor	mnliance	
for the premises described the attached drawings, in a	herein. The undersigned	d agrees that all constructive irements of the Town Zor	tion shall be performed, as shown on ning Ordinance and all other
applicable Town Ordinance	s and the Laws and Reg	ulations of the State of V	Visconsin.
Applicant or Agent		Phone	
Owner of Site		riione _	
Owner of Site	*.	Phone	
Lot Size: Length	Width		
Building Size: Length	Wid	lth	Height
Contractor			
Address		Phone	
Address of the Premises A	fected		
Lot	Plank	Subdivision	Name
or Metes and Bounds Desc	Block	Subdivision	Name
4			
Zoning District Classification			
Description of Existing Ope	ration or Use		
Type of Structure(s)			
Number of Stories			
Estimated Value			
Type of Water Supply			*
Attachments: Juneau County Sa	nitation Permit NR		
Juneau County Sh	oreland Zoning Permit N	R	
1. Scaled Site F boundaries, c proposed stru 2. Additional Inf		epared by a registered languses and size of the follow r public ways; driveways	nd surveyor showing the location, wing: subject site; existing and ; side and rear yards. nistrator.
Applicant's Verification o	f Information:		
I hereby certify tha the best of my kno	t all the above statement	s and attachments subm	litted hereto are true and correct to
	Owner		
	A U k		nature
	Applicant o	or Agent:sig	nature
Notice: Permit shall be revoked wit found to exist.	hout notice if misreprese	ntation of any of the abo	ve information or attachments is
Permit is Null and Void if iss	sued in error.		
Construction of a new build stakeout or placement of the	ing, building addition, or e building on the lot is ap	alteration, or a building roproved by the Zoning A	move shall not be permitted until the dministrator.
	Permit No.		
	5		
Number of dwelling units re			
Number of awelling units re	maning to be developed	on property	