

**LINCOLN COUNTY
CHANGE OF LAND USE
PERMIT APPLICATION**

LINCOLN COUNTY ZONING
801 N. SALES ST, STE 103
MERRILL, WI 54452
(715) 539-1087

**Application must be filled out completely and returned
with payment in order for staff to review**

PERMIT: _____

PROPERTY OWNER INFORMATION	
Owner(s)	
Mailing Address	
City, State, ZIP	
Telephone	Cell: _____ Home: _____
E-Mail	

BUILDING SITE LOCATION Tax Parcel ID: _____			
Site Address: _____			If you do not have one, you are required to apply Application Date: _____
Section: _____	Township: _____ North	Range: _____ East	Acres: _____ Zoning District: _____
Government Lot _____ OR _____ ¼ _____ ¼		Additional Info: (Lot, Block, Subdiv, CSM, etc)	

ADDITIONAL INFORMATION (ex: Converting a restaurant to a single-family dwelling)

IF CHANGING TO A DWELLING:	Dwelling will be <input type="checkbox"/> Year Round <input type="checkbox"/> Seasonal	Number of Bedrooms _____
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PLEASE ATTACH A SEPARATE 8 ½" X 11" PLOT PLAN DRAWING
A detailed drawing of the plot plan <u>MUST</u> be given. Include on the drawing <u>ALL</u> of the information requested below. (Our office recommends, but does not require, drawing your plot plan directly onto an aerial printout of your property. You can print them at no charge through our GIS mapping available online or you can request one from our office at no charge.)
1. Shape of parcel & indicate which direction is North.
2. Show the location and names of all surrounding roads/highways.
3. Show the location and names of all area water bodies (lakes, rivers, creeks, ponds, etc.)
4. Draw <u>ALL</u> structures/buildings on parcel.
5. Indicate exactly which structure/building is having its Land Use changed.

PLEASE READ AND SIGN	
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 Lincoln County Zoning Ordinance and 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 department staff to enter my property at any reasonable time for the purpose of inspection to assure compliance with the zoning laws relative to the issuance of this permit.	
I acknowledge that I am responsible for complying with State and Federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. I understand that failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Department of Natural Resources web page (http://dnr.wi.gov/wetlands/locating.html) or contact a DNR Service Center.	
I acknowledge the following:	
· No work on a structure or facility requiring a private sewage system shall begin until a Sanitary Permit has been issued according to Chapter 145.195(1) Wisconsin Statutes and Chapter 17.8.50 Lincoln County General Code.	
· No work on a structure or facility requiring a Land Use permit shall begin until a Land Use Permit has been issued.	
· All Land Use Permits expire two (2) years from the date issued.	
· Building permits are required for the construction of new dwellings or additions to dwellings.	
Property Owner Signature: _____	Date: _____

THIS BOX FOR OFFICE USE ONLY		Fee: \$ 150.00 Receipt:										
Reviewed By:		Staff Signature:										
		Date:										
Permit Application: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		Density (if applicable):										
Conditions of Permit:		Other Permits Needed: <table border="1" style="margin-top: 5px; width: 100%; border-collapse: collapse;"> <tr> <th style="font-size: small;">Permit Type</th> <th style="font-size: small;">Required/Received</th> <th style="font-size: small;">Number</th> </tr> <tr> <td>Sanitary</td> <td style="text-align: center;">/</td> <td></td> </tr> <tr> <td>Conditional Use</td> <td style="text-align: center;">/</td> <td></td> </tr> </table>		Permit Type	Required/Received	Number	Sanitary	/		Conditional Use	/	
Permit Type	Required/Received	Number										
Sanitary	/											
Conditional Use	/											
<input type="checkbox"/> See Attached Permit Card												
TYPE OF LAND USE CHANGE												
CURRENT USE		PROPOSED USE										
<input type="checkbox"/> Residential - Accessory	→ TO →	<input type="checkbox"/> Residential - Accessory										
<input type="checkbox"/> Residential – Principal (Dwelling)		<input type="checkbox"/> Residential – Principal (Dwelling)										
<input type="checkbox"/> Agricultural – Accessory		<input type="checkbox"/> Agricultural – Accessory										
<input type="checkbox"/> Agricultural - Principal		<input type="checkbox"/> Agricultural - Principal										
<input type="checkbox"/> Commercial - Accessory		<input type="checkbox"/> Commercial - Accessory										
<input type="checkbox"/> Commercial - Principal		<input type="checkbox"/> Commercial - Principal										
<input type="checkbox"/> Industrial - Accessory		<input type="checkbox"/> Industrial - Accessory										
<input type="checkbox"/> Industrial - Principal		<input type="checkbox"/> Industrial - Principal										