

CITY OF MINERAL POINT ZONING PERMIT

CITY CLERK: The undersigned hereby applies for a permit to do work herein described and located as shown. The undersigned agrees that all work will be done in accordance with the Zoning Ordinance and all other ordinances of the City of Mineral Point and with all laws of the State of Wisconsin, applicable to said premises, and with the information hereon.

PROPERTY ADDRESS: _____

APPLICANT/PROPERTY OWNER:

Name: _____

Address: _____

Phone: _____

AGENT/CONTRACTOR (IF NOT PROPERTY OWNER)

Name: _____

Phone: _____

TYPE OF PERMIT REQUESTED: Checks Applicable:

- Zoning Permit
- Certificate of Appropriateness (Historic)

SHORT EXPLANATION OF WORK TO BE COMPLETED:

Zoning Permit & Certificate of Appropriateness Application Fees:

Flat Fee: \$50.00

+ \$3.00 per \$1,000 of the estimated Project Cost

+ \$25.00 Meeting Fee (for COA Applications, only if needed)

ESTIMATED PROJECT COST: \$ _____

FEE: \$ _____ DATE PAID: _____

*****FOR OFFICE USE ONLY*****

APPLICATION SUBMITTED: _____

ZONING ADMINISTRATOR APPROVAL: _____ DATE: _____

COA APPLICATIONS ONLY

TWO PERSON COMMITTEE: _____ Date _____

-OR-

COMMISSION APPROVAL @ MEETING: _____ MEETING DATE: _____

Historic Preservation Chairman

PERMIT NUMBER: _____

Site Plan for Additions and/or New Accessory Buildings

Fill in dimensions on this plat and locate any accessory building, street with setback, **OR** attach your own plans.

Lot Size: _____

New Accessory Building Dimensions: _____LENGTH_____WIDTH_____HEIGHT

