

6085 COUNTY ROAD T • OSHKOSH, WI 54904 • PHONE (920) 235-6953

www.townofvinlandwi.gov

Zoning Application

(Submit 1 hard copy or 1 electronic copy of plans / drawings)

Site Address:	Parcel#
	n site address):
Phone:	E-Mail:
Work in Rd. ROW Ne	ermit Sign Permit Swimming Pool/Hot Tub* w Structure/Pole Shed, Detached Garage/Addition Deck* wired (if applicable for deck project)
Signature and Certification:	
	<u> </u>
The, below-signed, hereby application The below-signed agrees that all wo Toning Ordinance along with all ot Winnebago County and the State of to the best of my knowledge, and I o Toermit. By signing this application, I Dofficials to enter my property at any	on for a zoning permit for the work described and located as shown here ork shall be done in accordance with the requirements of the Town of Vinleter applicable town ordinances and the applicable laws and regulation with Wisconsin. I declare that the information I am supplying is true and accuracknowledge that this information will be relied upon for the issuance of I am granting permission to the Town of Vinland staff and elected/appoint reasonable time for the purpose of inspection to assure compliance with
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Phone: _____ Email: ____

Current Zoning:	_ Current Land Use: _	
Proposed Use or Project:		
Cost / Value of Building (s) / Structure (s):		

Building & Site Plan Submittal Requirements:

Building Plans, drawn to scale, are required which shall show the following:

- All floor plans
- At least two (2) building / structure elevation views

Site Plan, drawn to scale, is required which shall include the following (as applicable):

Location of the project on the property

Site Plan / Project Specifics:

- Any existing or proposed structures or improvements on the property (e.g. buildings, structures, signs, driveways, parking/loading areas, ponds, etc.)
- Dimensions of any proposed improvements
- Setbacks of any proposed improvements on the property from property lines, roadways, wetlands, and surface waters (i.e. creeks, streams, rivers, ponds and lakes)
- Any existing and proposed well and wastewater disposal systems.
- Location and dimensions of all existing and proposed outdoor storage areas (if applicable)

Application Process:

Provide a detailed legal description of the property

Make all checks payable to the Town of Vinland

Submit the required information to:

Town of Vinland 6085 County Road T Oshkosh, WI 54904

If you have any questions, please call or email the Town Zoning Administrator:

Don O'Connell @ zoning@townofvinlandwi.gov or (920) 915-9857

Parcel No.:		THIS PAGE IS Receipt Date				
Professional Se	r vices: Service		Firm			Estimated Fee
Shoreland, Floo	odplain and W	/etland Review:				
Is the proposed us	se or project loca	ated in a "shoreland"	' ?	Yes	No	
Is the proposed us	se or project loc	ated in a "floodplain	ı"?	Yes	No	
Is the proposed us	se or project loc	ated in "County" zor	ning?	Yes	No	
Notes:						
Decision:	z ana may require	: permit(s) / approval(5) Ji Oili VVIIII	esago county		
	ued:	Denied:		Fee Total: _		
Condition(s) of iss						
Reason(s) for deni	al:					
Zoning Administra	tor's/Town Offi	cial Signature:				

Occupancy Certificate:

I hereby certify that the building, structure, or addition thereto, and /or use authorized with this zoning
permit complies with all applicable provisions of the Town of Vinland Zoning Ordinance, conforms with
the plans and specifications upon which this zoning permit was based, and complies with any conditional
use permit and / or variance issued in conjunction with this zoning permit.

Zoning Administrator Signature:	Date: