

Case #: _____
 Meeting Date: _____

APPLICATION FOR BOARD OF ADJUSTMENT

Office Use:
 Zoning District _____
 Lakes Class _____
 Notices Sent _____
 Fee Paid _____

Ashland County Zoning Dept.
 201 W Main St. Rm. 109, Ashland, WI 54806
 Phone – (715) 682-7014 / Fax – (715) 682-7148

The Undersigned hereby requests a Board of Adjustment permit as follows:

Property Owner (s) _____ Contractor _____
Property /Site Address _____ Authorized Agent _____
 _____ Agent's Telephone _____

Owner's Telephone _____ Written Authorization Attached: Yes () No () _____

Accurate Legal Description involved in *this request* (specify **only** the property involved with this application)

PROJECT LOCATION		Legal Description: (Use Tax Statement)				Tax ID #:	
_____ 1/4, _____ 1/4, of Section _____, Township _____ N, Range _____ W		Town of:		Lot Size	Acreage		
Gov't Lot	Lot #	CSM #	Vol. Page	Lot(s) No.	Block(s) No.	Subdivision:	

Purpose of Hearing

- [] Variance from the terms of Section _____ of _____ Ordinance.
- [] Appeal of a decision rendered by _____ on _____ (Date).
- [] Interpretation of a prior BOA decision and/or condition(s) of Case # _____.

What do you intend to build? _____ # of Stories: _____
 House ___ x ___; Garage ___ x ___; Deck ___ x ___; Deck ___ x ___; Porch ___ x ___; Porch ___ x ___; (_____) ___ x ___
 Misc: (_____) ___ x ___ Total Footprint _____ sq.ft. Total overall dimensions: _____' x _____' x Height _____

(Fill out ONLY what is being requested by Variance)

- I request a _____' setback from centerline of _____; I request a _____' setback from right-of-way of _____;
- I request a _____' setback from _____ property line and a _____' setback from _____ property line.
- I request a _____' setback from ordinary high watermark of _____
- I request a _____' setback from wetland; Other _____

Description Required (show all setbacks here)	Measurement	Description Required (show all setbacks here)	Measurement
Place NA (if doesn't apply to your property)		Place NA (if doesn't apply to your property)	
Setback from the Centerline of Platted Road	Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	Feet	Setback from the River, Stream, Creek	Feet
		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	Feet		
Setback from the South Lot Line	Feet	Is there Wetlands on property	Yes No
Setback from the West Lot Line	Feet	Setback from the Wetland	Feet
Setback from the East Lot Line	Feet		
		Shows 20% Slope Area on plot plan	Yes No
Setback to Septic Tank or Holding Tank	Feet	Elevation of Floodplain	Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet	Setback to Well	Feet

LIST ADJACENT PROPERTY OWNERS “ **ON THIS FORM** “:

****** Attach separate sheet “only if “additional space is needed. (12 spaces are provided)

Provide **names** and **full addresses** of the owners of all property abutting and within 300’ of the applicant’s property. (**Note:** Applicant is **solely** responsible for obtaining **accurate**, current names and addresses.)

(1) _____	(2) _____	(3) _____
_____	_____	_____
_____	_____	_____
(4) _____	(5) _____	(6) _____
_____	_____	_____
_____	_____	_____
(7) _____	(8) _____	(9) _____
_____	_____	_____
_____	_____	_____
(10) _____	(11) _____	(12) _____
_____	_____	_____
_____	_____	_____

Have you consulted with a Zoning Staff Member prior to applying for permit? Yes () No ()

Who did you consult with? _____

_____	_____
	Agent’s Signature
_____	_____
Property Owner’s Signature (All Owners’ must sign)	Agent’s Address
_____	_____
Property Owner’s Mailing Address	
_____	_____
	(Date)

**** Note:**

If you wish to appeal the Board’s decision you must file a writ of certiorari within 30 days of the signed decision to Circuit Court.

Receiving Board of Adjustment approval, **does not** allow the start of construction, you **must** first obtain your permit(s) from the Zoning Department.

Web Site Available:
www.co.ashland.wi.us