

**CITY OF MAYVILLE
CONDITIONAL USE PERMIT APPLICATION**

INSTRUCTIONS

Applications are to be filed with the Building Inspector, and he/she shall refuse applications that are not complete or that are not legible.

NAMES AND ADDRESSES

Applicant: _____

Owner of the Site: _____

Architect or Engineer: _____

Contractor: _____

Property Owners Adjacent and Opposite: _____

DESCRIPTION OF SUBJECT SITE

Address: _____ Parcel No. _____

Lot _____ Block _____ Subdivision _____

Metes and Bounds description: _____

Zoning District Classification _____

Description of Existing Operation or Use: _____

Description of Proposed Operation or Use: _____

Number of Employees: _____

Type of Improvement: _____

ATTACHMENTS

The following items shall be attached to this application:

PLAT OF SURVEY prepared by a registered land surveyor showing location, elevations, uses, and size of the following: subject site, existing and proposed structures, existing, and proposed easements, streets and other public ways, off street parking, loading areas and driveways, existing highway access restrictions, existing and proposed street side and rear yards. In addition, the survey shall show the location elevation and use of any abutting lands and their structures within forty (40) feet of the subject site.

PROPOSED DEWAGE DISPOSAL PLAN if municipal sewerage service is not available. This plan should be prepared after consultation with the Mayville Water and Wastewater Utilities Director and shall be approved by an Engineer registered in the State of Wisconsin who shall certify in writing that satisfactory, adequate, and safe sewage disposal is possible on the site as proposed by the plan in accordance with applicable local, county, and state regulations.

PROPOSED WATER SUPPLY PLAN if municipal water service is not available. This plan shall be prepared after consultation with the Mayville Water and Wastewater Utilities Director and shall be approved by an Engineer registered in the State of Wisconsin, who shall certify in writing that an adequate and safe supply of water will be provided.

ADDITIONAL INFORMATION as may be required by the Planning Commission, Extraterritorial Zoning Commission or Building Inspector.

REASON FOR REQUESTING A CONDITIONAL USE

CERTIFICATE

I hereby certify that all the above statements and attachments submitted hereto are true to the best of my knowledge and belief.

Applicant _____
(signature)

Address _____

City, State, Zip _____

Date _____

Date application Filed: _____

Fee Submitted _____

* * * * *

Dates Notice Published _____

Dates Notice Mailed _____

Public Hearing Date _____

APPROVAL OR REFUSAL

Date Permit (Issued, Denied) _____

Building Inspector _____
(Signature) (Date)

(Attach applicable minutes)

NOTES:

PERMIT MAY BE REVOKED without notice if misrepresentation of any of the above information or attachments is found to exist.

PERMIT IS NULL AND VOID if issued in error. It is understood that any permit issued on this application will not grant any right or privilege to erect any structure or to use any premises for any purpose that is prohibited by the Zoning Ordinance or any other state or local laws.

CHANGES in the plans or specifications submitted in the original application shall not be made without prior written approval of the Zoning Administrator.