

Fee \$100

Payable to Town of Oshkosh

Town of Oshkosh
General Zoning Permit Application

Today's Date: _____ Office Use Zoning ID Number _____

Property Owner: _____

Applicant/Builder: _____

Address to be mailed to: _____

City/State/Zip _____

Phone: _____ Cell: _____ Email _____

Construction Site Address: _____

Parcel ID _____ Lot size: _____ Zoning: _____ Existing Use: _____ Vacant: Yes No

Describe Existing Structures: _____

Sq footage of house: _____ Sq footage of accessory structures _____

PROPOSED CONSTRUCTION

Proposed start date: _____

USE: Principal _____ Accessory _____ Res _____ Com/Ind _____ Ag _____ Other _____

Type: New _____ Addition _____ Alteration _____ Other _____ (explain)

Describe Proposed Construction: _____

1st Floor: Wall Hgt _____ Size _____ Sq Ft _____

2nd Floor: Wall Hgt _____ Size _____ Sq Ft _____

Other: Wall Hgt _____ Size _____ Sq Ft _____

Garage: Wall Hgt _____ Size _____ Sq Ft _____ attached detached

Overall Structure Height: _____ Mid-Peak Height: _____

Estimated Cost _____ Site Plan included Yes No Walk-Out Basement: Yes No

Owner/Agent Signature: _____ Date: _____

I hereby acknowledge the above construction meets town zoning code and that the proper fee was paid.

Issued by: _____ Date: _____

NOTE: The Building Permit (if required) for this project will be issued by the building inspector for the Town of Oshkosh.

FOR OFFICE USE ONLY

Payment received by check # _____ or online/CC

Current Zoning: _____ **Future Land Use** _____

Overlays: Shore Land _____ Wet Land _____ Flood Plain _____ SWDD _____

Sewer Y N Sanitary District: _____

Updating Y N

New Y N

Sanitary Permit # _____ Date: _____ Issued by: _____

SETBACKS

Principal

Street _____ Rear _____

Side _____ Side _____

Shore _____ Other _____

Accessory

Street _____ Rear _____

Side _____ Side _____

Shore _____ Other _____