Village · Bloomfield · Town

Tax Parcel #:

Village-PO Box 609 | Town-PO Box 704 | N1100 Town Hall Rd | Pell Lake, WI 53157 (262) 279-6039 Ext 2 | Fax: (262) 279-3545

Zoning Permit Application

____Town

____Village

Please check all that apply:

- Residential (Single-Family)
- Residential (Multi-Family)
- Residential Addition/Alteration
- Residential Accessory Use
- □ New Mobile Home
- Mobile Home Additions/Enclosures/Alterations
- □ Mobile Home Accessory Structure
- Deck
- Fence
- □ Swimming Pool
- 🔲 Signage
- Other:

A completed application, along with a site plan and fees must be received by the Zoning Administrator for review before the issuance of a zoning permit. Missing information may cause the delay of review or a returned/denied application.

Owner Name(s):			
Mailing Address:		Phone:	
	Email:		
Project Address (if different than above):			
Applicant/Agent Name:			
Mailing Address:		Phone:	
	Email:		
Subdivision Name:	Lot #:	Blo	ock #:
Current Zoning of Site:	Current Overl	ay Districts of Sit	te:
Proposed Type of Structure:			
Proposed Use of Structure or Site:			
Lot Area: sq. ft. Proposed Building	/ Structure Footpri	nt of Area:	sq. ft.
Existing Building Coverage on Site: %	Proposed:	%	
Proposed Setbacks: Front Rear	Left	Right	
Proposed Structure Dimensions: X Propo	osed Building Heigl	nt:	ft.
Estimated Cost:			
Sanitary Facilities: Municipal Sewer	Septic System		

The Owner(s) agrees to comply with the Village/Town of Bloomfield's Municipal Code and with the conditions of this permit; understands that the issuance of the permit creates no legal liability, expressed or implied, of the Department, Municipality, Agency, or Inspector; and certifies that all information is accurate.

Property Owner(s):

Name – Print	Name – Signature	Date
Name – Print	Name – Signature	Date
Applicant/Agent of all Owners:		
Name – Print	Name – Signature	Date

COST RECOVERY AGREEMENT

I/We, the undersigned, do hereby understand and agree that as an applicant or petitioner of the Village/Town of Bloomfield, I/We will be responsible for all normal fees payable by an applicant or petitioner (e.g. application fees, engineer fees, attorney fees, etc.). I/We further understand and agree to be responsible for any additional or consequential costs to the municipality as a result of my/our application or petition (i.e. engineering, legal, or other professional services). All fees and costs shall be paid withing thirty (30) days of invoice and must be paid prior to the Village/Town holding any public hearings, meetings, and the issuance of any permit or license. If payment is not made, said fees and costs may be assessed against the real property as a special charge.

I/We understand that the Village/Town of Bloomfield by and through their agents, representatives (elected or appointed), employees, successors or assignees make no representations of their findings. I/We forever hold them harmless of all liability whether founded in tort or contract and as such agree to indemnify them from all claims arising out of these transactions.

Property Owner(s):

Name – Print	Name – Signature	Date
Name – Print	Name – Signature	Date
Applicant/Agent of all Owners:		
Name – Print	Name – Signature	Date

OFFICE USE ONLY:				
Date Filed:			Received by:	
Permit Fees:			Permit Issued By:	Date:
Permit:	\$			
Other:	\$			
Other:	\$		PERMIT #:	
Total:	\$			