



# MARQUETTE COUNTY ADMINISTRATIVE REVIEW PERMIT



Marquette County Zoning Office  
PO Box 21  
Montello, WI 53949  
608-297-3036

Section 1 (Owner/Agent Information)	
Date _____	
Owner's Name _____	Phone # _____
Mailing Address _____	City _____ State _____ Zip _____

Section 2 (Property Information)	
Property Address: _____	Township: _____
Parcel ID Number _____ - _____ - _____	
Legal Description _____	
Subdivision / CSM _____	Lot _____ Block _____
Directions to Property from closest County or State Road: _____	

Section 3A Annual Camping Permit	Not Applicable _____
Lot Size: _____ acres (must be 5 or more)	Camper License Plate # _____
Town Board Approval Received: <input type="checkbox"/> Yes - Date _____	<input type="checkbox"/> No
Sanitary Facilities: <input type="checkbox"/> Septic System <input type="checkbox"/> Privy <input type="checkbox"/> Compost Toilet <input type="checkbox"/> Self-Contained Unit	
Method of Screening: <input type="checkbox"/> Fence <input type="checkbox"/> Tree Rows <input type="checkbox"/> Existing Vegetation <input type="checkbox"/> Earthen Berm	

Section 3B Shoreland Zoning Activity	Not Applicable _____
Type of Project: <input type="checkbox"/> Stairs to Water <input type="checkbox"/> Excavation on slope of >20%	

Section 3C Salvage Vehicle Storage	Not Applicable _____
Proposed Number of Vehicles _____ (Maximum is 3)	
Town Board Approval Received: <input type="checkbox"/> Yes - Date _____ <input type="checkbox"/> No	
Method of Screening: <input type="checkbox"/> Fence <input type="checkbox"/> Tree Rows <input type="checkbox"/> Existing Vegetation <input type="checkbox"/> Earthen Berm	

Section 4 (Fees) (Make checks payable to: Marquette County Zoning Department)	
Check only ONE below:	
_____ Annual Camping Permit	\$250 Receipt #: _____
_____ Storage of Salvaged Vehicles	\$500
_____ Shoreland Activity	\$75

**PLOT PLAN** (Site as viewed from above)

- 1). Make a drawing of your project.
- 2). Show distances from Centerline of Road(s), All Lotlines, and Ordinary High Water Mark if applicable.
- 3). Please return with permit fee.

**\*\*Applications without a plot plan WILL BE RETURNED\*\***

You are responsible for complying with State and Federal laws concerning construction near, or on, wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Department of Natural Resources Wetland Identification Web Page (<http://dnr.wi.gov/topic/wetlands/locating.html>) or contact a Department of Natural Resources Service Center.

The undersigned hereby makes application for the work described and located as shown herein. The undersigned agrees that all such work shall be done in accordance with all the requirements of the Zoning Ordinance and all other applicable ordinances of Marquette County and all applicable laws, codes and regulations of the State of Wisconsin, and states that the above information is true to the best of his or her knowledge. Issuance of this permit is not to be construed as legal responsibility for the construction on the part of Marquette County or its staff. Pursuant to Marquette County Zoning Ordinance 70.01 (E), by applying for this permit the undersigned grants permission for the Marquette County Zoning Department, its agents or assigns, to enter upon the premises and inspect the work to determine compliance with the zoning ordinances and the terms of this permit.

Signature of Owner or Agent \_\_\_\_\_

**INSPECTION \*\*\*\*\*FOR OFFICE USE ONLY \*\*\*\*\***

<b><u>Setbacks</u></b>	<b>Comments:</b> _____
Wetland _____	_____
Waterline _____	_____
Lotline _____	_____
Road _____	_____
Inspector _____	Date _____