



MARQUETTE COUNTY WIRELESS COMMUNICATION FACILITIES ZONING PERMIT APPLICATION



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

Section 1 (Owner/Agent Information)

Date _____

Property Owner's Name _____ Phone # _____

Mailing Address _____ City _____ State _____ Zip _____

Agent Name _____ Agent's Phone # _____

Agent Address _____ City _____ State _____ Zip _____

Section 2 (Property Information)

Property Address: _____ Township: _____

Legal Description _____

Parcel ID Number _____

Zoning District _____ Acres _____ or Lot Size _____ x _____

Directions to Property from closest County or State Road: _____

Estimated Start of Construction: _____

Driveway Access: New _____ Existing _____

Section 4 (Fees) (Make checks payable to: Marquette County Zoning Department)

Check only ONE below:

_____ \$3,000 New Mobile Service Support Structure and Facilities

_____ \$3,000 Class 1 Collocation

_____ \$150 Class 2 Collocation

Receipt #: _____

Pursuant to the Marquette County Zoning Ordinance Chapter 70.15 (S), in all zoning districts, any building or structure that exceeds one hundred (100) feet in height must be setback for all parcel, property lines and lot lines a distance equal to the height of the building or structure.

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). Show location of the Septic System and replacement system area if applicable.
- 4). 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 *****

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