



City of MONDOVI

PERMIT #: _____

156 S. Franklin St., Mondovi, WI 54755

Tel. 715-926-3866

Complete this application and return it with the permit fee to the above address. The undersigned hereby makes application for a Zoning/Building permit for the work described and located as shown herein. The undersigned agrees that the work shall be done in accordance with the requirements of the City of Mondovi Zoning Ordinance (Chapter 18) and with all other applicable county ordinances, and the laws and regulations of the State of Wisconsin. Permit shall be valid for the period of one year from the date of issuance. **Those sections highlighted in black are required to be completed.**

Signature of Applicant: _____ **Date:** _____

Printed Applicant's Name: _____ **Phone:** _____

Address: _____ City, St, Zip: _____

Email Address: _____

Location of Property:

Address: _____, Mondovi, WI **Parcel ID:** 251- _____

Lot(s) #: _____ **Subdivision:** _____

Present Use of Land:

Zone: _____ Existing Use: _____

Proposed Use:

_____ Single Family _____ Other new building: (describe) _____

_____ Duplex _____ Addition or alteration: (describe) _____

_____ Fence _____ Sign **Est. Building Cost** \$ _____ .00

Other Required Permits: (date of application) _____

Building Details:

Lot size: _____ ft. X _____ ft. = Area _____ **Sq.ft.**

Size of Structure: _____ ft. X _____ ft.; Height _____ ft. Stories _____ Floor Area _____ Sq.ft.

Note:

Zoning District guidelines can be found in the City Ordinance Chapter 18 on the City website or a copy will be provided when requested.

Submit a sketch of proposed work:

Show existing structures, proposed structures, or additions, etc. and the distance from:

_____ **Front Lot Line**

_____ **Side Lot Lines**

_____ **Back Lot Line**

_____ **Other Structures on Property**

_____ **Well, septic tank, drain field (if applicable)**



For Office Use Only:

Permit Issued / Denied Date: _____ By: _____

Reasons for Denial: _____

Remarks: _____
