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Mequon, Wisconsin 53092
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www.ci.mequon.wi.us

INSPECTION DIVISION

RESIDENTIAL ZONING APPLICATION

Date: _____

Parcel ID No. _____

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Proposed Project: <input type="checkbox"/> New Dwelling Construction – Total Sq. Ft. _____ <input type="checkbox"/> Building Addition – Total Sq. Ft. _____ <input type="checkbox"/> Pool <input type="checkbox"/> Fence: ≥4.5' or <4.5' (circle) <input type="checkbox"/> Detached Garage: Total sq. ft. _____ <input type="checkbox"/> Deck | <input type="checkbox"/> Gazebo/Pergola <input type="checkbox"/> Shed > = 150 square feet <input type="checkbox"/> Shed < 150 square feet <input type="checkbox"/> Agricultural Building: Total sq. ft. _____ <input type="checkbox"/> Animal Related Building: Total sq. ft. _____ <input type="checkbox"/> Other (explain) _____ _____ |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Property Address: _____

Applicant Name: _____

Application Signature: _____

Mailing Address: _____

City, State and Zip Code: _____

Phone Number: () - _____ e-mail address: _____

Property Owner Name (if other than applicant): _____

Property Owner Signature (if other than applicant): _____

=====FOR CITY USE ONLY=====

Zoning District: _____ Parcel size: _____

- 1. Property in a PUD? Yes No Comments _____
- 2. Property in Floodplain? Yes No Comments _____
- 3. Property Contain Wetlands? Yes No Comments _____
- 4. Is the parcel a substandard lot? Yes No Comments _____
- 5. BOA Variance Needed? Yes No Comments _____
- 6. Conditional Use Grant Required? Yes No Comments _____
- 7. Property a local landmark? Yes No Comments _____

Setbacks Proposed: Front: _____ Rear: _____ Side #1 _____ Side #2 _____
Setbacks Required: Front: _____ Rear: _____ Side #1 _____ Side #2 _____

Structure or Building Height Proposed: _____ Lot Coverage Area Proposed: _____ Sq. Ft.
Structure or Building Height Required: _____ Lot Coverage Area Current: _____ Sq. Ft.

Staff Comments: _____

Approved By: _____

Date: _____