



# Town of Delafield

## Zoning Permit Application Information

**NOTE: This is only a guideline and is not a substitute for the language in the Zoning or Building Code. Please refer to those codes for detailed information about your request.**

### I. General Process

In order to build or improve your home or business or add hard surfaces, you are required to obtain both a zoning permit and a building permit. In the Town of Delafield, the issuance of permits is accomplished in two steps. Tim Barbeau and Mike Hadley are the zoning administrators and review and issue zoning permits. Mike Hadley is also the building inspector and issues building permits once a zoning permit is issued. If you live in a shoreland area (1,000 feet from a lake or 300 feet from a navigable waterway), you will be required to apply for and receive a permit from Waukesha County Department of Parks and Land Use, Planning Division. Once the county approves and issues a zoning permit, it is sent to the Town. When the Town has completed the permit reviews, copies of all permits are issued to the applicant. It is suggested that applicants contact the Town zoning administrator for initial consultation or submit the necessary forms and fees to the Town clerk's office during normal business hours and the information will be passed on to the zoning administrator for review.

### II. Information Required to get a Zoning Permit

The following items are required in order to obtain a zoning permit (explained in more detail below).

- Completed Zoning Permit Check List
- Plat of Survey (see exceptions below)
- 1 Copy of the construction plans
- Acknowledgement of open space balance form
- Signed Owner Zoning Notice Form (to be received from Zoning Administrator)

Zoning Permit Checklist: The form can be found online at [www.townofdelafeld.org](http://www.townofdelafeld.org), under the "Licenses and Permits" tab. Complete the upper section, sign the document and submit to the building inspector (or if he is not at the Town Hall, submit to the Town Clerk's office to forward to the inspector).

Plat of Survey: The plat of survey must show all existing and planned structures and hard surfaces (house, garage, sheds, patio, sidewalk, decks, pools, hardscape, etc.). In addition to the normal information provided on a plat of survey, it shall also include setback distances (front, shore) and offset distances (side, rear), and a listing of hard surfaces with the square footages for each item. The survey needs to be signed and stamped by the surveyor. For more improvements that do not involve the construction of a building, (landscape, hardscape or driveway modification) and a building permit is not needed, a site plan prepared by a registered engineer, architect or landscape architect containing all the required information above may be substituted for the Plat of Survey.

For zoning permits on lots that have at least 1,500 square feet more open space than the minimum required by the Code, no plat of survey is required, however, the applicant must provide an aerial photo or other plan showing and calculating the open space on the property (see Code Section 17.03 1.A 2. E(3) for more detail on this option).

Construction Plans: One copy of the construction plans (floor plans, elevations) is required to be submitted to the Zoning Administrator to confirm that the survey or site plan matches the proposed building and to confirm other zoning items such as eave height and overall height.



**Acknowledgement of Open Space Balance:** Prior to the zoning permit being issued, the owner of the property must sign an acknowledgement of open space balance form which informs the owner the balance of open space left on the property. A copy of the form will be included in the owner's building permit file.

### **III. Additional Requirements/Information**

1. An as-built survey showing the final open space calculations of new homes, additions, improvements on lots on Pewaukee Lake or improvements that reduce the open space to within 500 square feet or less of what is required, must be submitted to the zoning administrator to confirm that the property conforms to the code before occupancy is granted.
2. For lands that are not served by public sanitary sewer, a Preliminary Site Assessment is required. Contact Waukesha County Department of Parks and Land Use, Environmental Health Division at (262) 896-8300.
3. For lands that abut a County Highway, contact the Waukesha County Department of Public Works at (262) 548-7740 for a highway access permit.
4. For lands that abut a State Highway, contact the WisDOT at (262) 521-5344 for a State access permit.

#### **Contact Information:**

Mike Hadley

Building Inspector

Office Hours: Monday, Wednesday, and Friday: 8:00 – 10:30 a.m.

Fax: 262-646-8687

Office: 262-646-2778

Email: [mhadley@safebuilt.com](mailto:mhadley@safebuilt.com)

Project Location (Building Address)	<b>TOWN OF DELAFIELD ZONING PERMIT CHECK LIST</b>	Permit No. _____
		Tax Key No. _____

Owner's Name (print)	Mailing Address	Phone No.	Email
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Contractor	Mailing Address	Phone No.	Email
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Surveyor/Landscape Architect	Mailing Address	Phone No.	Email
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<b>PROJECT INFORMATION</b>	Subdivision Name	Lot No.	Block No.
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Zoning District	Lot Area Sq. Ft.	Offsets/ Setbacks	Front Ft.	Rear Ft.	Left Ft.	Right Ft.
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<b>1. PROJECT</b>  <input type="checkbox"/> New Home <input type="checkbox"/> Pool <input type="checkbox"/> Addition <input type="checkbox"/> Landscape <input type="checkbox"/> Patio/Deck <input type="checkbox"/> Shed <input type="checkbox"/> Other: _____	<b>2. AREA INFORMATION</b>  Living Area _____ Sq. Ft. Garage _____ Sq. Ft. Shed _____ Sq. Ft. Other _____ Sq. Ft.	<b>3. TYPE</b>  <input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Non-Conforming
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<b>4. MISC. INFORMATION</b>  Height (to eave) _____ Ft.      Wetland Setback _____ Ft. Height (overall) _____ Ft.      Accessory Structures _____ EA Lot Width _____ Ft.      Open Space _____ % Shoreland Setback _____ Ft.      Subdivision Restrictions _____	<b>5. SEWAGE DISPOSAL</b>  <input type="checkbox"/> Public Sewer <input type="checkbox"/> Septic (conventional) <input type="checkbox"/> Septic (mound) <input type="checkbox"/> Holding Tank
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The applicant agrees to comply with the Town of Delafield Ordinances and with the conditions of this permit; understands that the issuance of the permit created no legal liability, express or implied, of the Department, Municipality, Agency or Inspector; and certifies that all the above information is accurate.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE: \_\_\_\_\_

OFFICE USE ONLY																																								
<b>OPEN SPACE CALCULATION</b>  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">House _____ Sf</td> <td style="width:30%;">Required O S Area _____ %</td> <td style="width:40%;"></td> </tr> <tr> <td>Garage _____ Sf</td> <td>Required O.S. Area _____ Sf.</td> <td></td> </tr> <tr> <td>Driveway _____ Sf.</td> <td>Lot Area _____ Sf.</td> <td></td> </tr> <tr> <td>Patio _____ Sf.</td> <td>Hard Surfaces _____ Sf.</td> <td></td> </tr> <tr> <td>Deck _____ Sf.</td> <td>Open Space Area _____ Sf.</td> <td></td> </tr> <tr> <td>Pool _____ Sf.</td> <td>Open Space _____ %</td> <td></td> </tr> <tr> <td>Sidewalks _____ Sf.</td> <td>Balance of _____</td> <td></td> </tr> <tr> <td>Access. Bldgs. _____ Sf.</td> <td></td> <td></td> </tr> <tr> <td>Other _____ Sf.</td> <td></td> <td></td> </tr> <tr> <td><b>Total</b> _____ Sf.</td> <td><b>FEES</b></td> <td></td> </tr> <tr> <td></td> <td>Review Fee _____</td> <td></td> </tr> <tr> <td></td> <td>Zoning permit Fee _____</td> <td></td> </tr> <tr> <td></td> <td><b>Total</b> _____</td> <td></td> </tr> </table>	House _____ Sf	Required O S Area _____ %		Garage _____ Sf	Required O.S. Area _____ Sf.		Driveway _____ Sf.	Lot Area _____ Sf.		Patio _____ Sf.	Hard Surfaces _____ Sf.		Deck _____ Sf.	Open Space Area _____ Sf.		Pool _____ Sf.	Open Space _____ %		Sidewalks _____ Sf.	Balance of _____		Access. Bldgs. _____ Sf.			Other _____ Sf.			<b>Total</b> _____ Sf.	<b>FEES</b>			Review Fee _____			Zoning permit Fee _____			<b>Total</b> _____		<b>Permit Issued By Municipal Agent</b>  Name: _____ Date: _____  <b>Conditions:</b> 1. This permit is issued pursuant to the attached conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. Owner/builder is solely responsible for compliance with all applicable State, Local, Building, and Zoning codes. 2. Permit expires one year from the date issued. 3. Work shall be performed between the following times:  7:00AM – 8:00PM Monday-Friday 7:00AM – 5:00PM Saturday 8:00AM – 5:00PM Sunday
House _____ Sf	Required O S Area _____ %																																							
Garage _____ Sf	Required O.S. Area _____ Sf.																																							
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	Zoning permit Fee _____																																							
	<b>Total</b> _____																																							

Distribution:     Owner                       Zoning Administrator                       Building Inspector                       Assessor

4/2015

# Town of Delafield

## Acknowledgement of Open Space Balance Form

OWNER	
ADDRESS	
TAX KEY NO.	
ZONING DISTRICT	
LOT AREA (s.f.)	
OPEN SPACE REQUIRED (%/s.f.)	
OPEN SPACE PROPOSED (%/s.f.)	
BALANCE OF OPEN SPACE (s.f.)	

I hereby acknowledge that I have received and reviewed the information noted above and am aware of the balance of open space on my property.

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Owner (print)

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Owner (signed)

Date

Received By: \_\_\_\_\_ Date: \_\_\_\_\_