

**APPLICATION FOR PERMIT**

**TOWN OF LYNDON  
Sheboygan County, Wisconsin**

- **THE FIRST STEP IS TO CONTACT THE BUILDING PERMIT AGENT, Jerry Rosche, 920-528-8844.**

**APPLICANT / OWNER**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Parcel #: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

*Have you contacted Sheboygan County Planning & Conservation to get their approval?*

yes  no

*Is your property on or near any wetlands?*

yes  no

**APPLICATION FOR:** (Check one)

- \_\_\_\_\_ Outdoor Furnace                      \_\_\_\_\_ Land Movement
- \_\_\_\_\_ Pond Permit                              \_\_\_\_\_ Building Permit
- \_\_\_\_\_ Raze Permit                                \_\_\_\_\_ Other

Description: \_\_\_\_\_

Value: \_\_\_\_\_

**REQUIRED ATTACHMENTS:**

- **ALL APPLICATIONS:** Proof that property is owned by applicant.
- **ALL APPLICATIONS:** Attach a site map or sketch of the parcel of real estate including but not limited to size, location of existing buildings, and proposed changes or additions.
- **ADDITIONAL INFORMATION:** Attach any additional information that may be required by the Town Board or Plan Commission to assist in the decision or recommendation.

**PREVIOUS APPLICATION:** Has a previous application been filed?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO

- **PERMIT EXPIRES ONE YEAR FROM DATE OF ISSUANCE**

**APPLICANT/OWNER:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**APPROVED BY:** \_\_\_\_\_ **FEE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_