Application					
Land Use Permit and Certificate of Compliance					
			Date	20	
To the Zoning A	Administrator:				
on the reverse of accordance with	f this application. the zoning ordinatate of Wisconsin,	The undersigne ance and all other	work herein described and lood agrees that all work will be our ordinances of the Town of End premises, and with the info	done in aton and with	
Signed:		_(owner) Signe	d:(ag	ent)	
Address:		Address:			
Sanitary Permit:					
Lot NoBlock NoSubdivision Addition or Replat					
Description (if u	nplatted)			·	
Premises to be u	sed as				
Zoning District Class or			f Construction		
Size	_feet wide	Feet long	sq ft in area		
Height	_ feet	No of sto	ories		
Work consists of (please check)		Fee \$			
New Building		Estimated Cost\$			
Addition		Application Approved			
Repairs			Date20		
Alteration			Signed:		
Moving					
Wrecking		Title of Administrative C	official:		

Parcel No. _____ St, Ave Application No. _____