

Town of Manitowish Waters  
**SHORELAND ALTERATION PERMIT APPLICATION**

Property Owners Name: \_\_\_\_\_ Permit No: \_\_\_\_\_

Owners Mailing Address: \_\_\_\_\_

Email Address/Cell Phone #/Home Phone # \_\_\_\_\_

Location of Property Involved: \_\_\_\_\_

Fire Number: \_\_\_\_\_ Zoning District: \_\_\_\_\_ Section: \_\_\_\_\_ Govt. Lot # \_\_\_\_\_ T 42 N, R 5 E

Lot Size: \_\_\_\_\_ X \_\_\_\_\_ Computer Number \_\_\_\_\_ Conforming Property (y/n) \_\_\_\_\_

**CONSTRUCTION INFORMATION: (Please attach a detailed drawing of the project)**

Name of Waterway: \_\_\_\_\_

Purpose & Intended Use of Project: \_\_\_\_\_

General Construction Procedure (include type of machinery to be used) \_\_\_\_\_

Fill Information (where from, where to) \_\_\_\_\_

Contractor Name, Address, Phone # \_\_\_\_\_

The following permits have been applied for: Army Corps of Engineers \_\_\_\_\_ WDNR \_\_\_\_\_ Vilas County \_\_\_\_\_

Have any permits been denied? \_\_\_\_\_ Is any portion of the project completed? \_\_\_\_\_

If yes, when? \_\_\_\_\_ Total Estimated project costs \$ \_\_\_\_\_

Anticipated start date \_\_\_\_\_ Completion date \_\_\_\_\_

The undersigned certifies that all information herein given to the Zoning Administrator for use in this application, to be true, complete, and correct. Permission to the Zoning Administrator to inspect the property is hereby granted by applicant.

APPLICANT SIGNATURE \_\_\_\_\_ CONTRACTOR SIGNATURE \_\_\_\_\_  
(Applicant Signature & contractor signature are required)

FEES: Permit Fee \_\_\_\_\_ Total Permit Fee \$ \_\_\_\_\_ Check # \_\_\_\_\_

ZONING ADMINISTRATOR SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

APPLICATION: Approved \_\_\_\_\_ Denied \_\_\_\_\_ Reason for Denial \_\_\_\_\_

Conditions of Permit: \_\_\_\_\_

Application Received by \_\_\_\_\_ Date Received \_\_\_\_\_