APPLICATION FOR ZONING / OCCUPANCY PERMIT

This application and the Louisa County Zoning Ordinance can be viewed at **www.louisacountyiowa.org**

OFFICE HOURS
MONDAY - FRIDAY
8AM - 4:30PM

LOUISA COUNTY ZONING DEPARTMENT
117 S. MAIN ST, P.O. BOX 284
WAPELLO, IA 52653-0284

TEL: 319-523-6111
FAX: 319-523-8175
asrdept@louisacountyiowa.org

APPLICANT INFORMATION (Please Print or Type)

Name of Property Owner: _____ Phone # _____
Address: _____
Name & Address of Builder: _____ Phone # _____

PROPERTY INFORMATION

E911 Location Address of the Property: _____
PARCEL # _____ ACRES / AREA: _____
LEGAL DESCRIPTION OF PROPERTY: SECTION: _____ TWP: _____ RNGE: _____
Additional Legal Description: _____
Current use of any structure(s) on the property: _____
_____

PROPOSED PROJECT INFORMATION

Type of Structure(s) to be built or moved onto the property: _____
Estimated cost of project: $ _____ Dimensions: _____ Ht: _____ Sq. ft:_____

☐ Application Fee $_____ (See current zoning fees schedule.) ☐ Site Plan ☐ E911 address
☐ Copy of Septic Permit # _____ ☐ Copy of Well Permit # _____ ☐ Copy of Plan (sketches or blueprints)
☐ Geothermal System? _____

APPLICANT SIGNATURE

I certify that the above information is true and correct to the best of my knowledge, and that all work will be completed in accordance with the Louisa County, Iowa Code. I hereby consent to allow a site inspection of the location specified above to verify land use and compliance with the regulations of the Louisa County Zoning Ordinance.

_____ _____ OWNER / BUILDER / AGENT
Signature of Applicant Date (Relationship to Land Owner)

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Is the proposed structure a cabin or mobile/manufactured home or modular home? ☐ No
☐ Yes. If the proposed structure is a ☐ Cabin or ☐ Mobile/Manufactured Home:
The landowner's certification and signature are required as shown below:

☐ I certify that one or more of the owners of the proposed structure is also an owner of the land on which it will be located.

OR

☐ I certify that the owner of the proposed structure has my permission to locate it on land that I own **AND** **I authorize Louisa County to assess it to me.**

_____ Tel: _____ Date:_____
Signature of Landowner

☐ Yes. If the proposed structure is a ☐ Mobile/Manufactured Home or ☐ Modular Home:
Contact Jerry Trimble, State Building Code Inspector at the Iowa Dept.of Public Safety
Tel:515-725-0044 Fax:515-725-6172 Email: *jtrimble@dps.state.ia.us*

********** OFFICE USE ONLY **********

ZONING DISTRICT: **C-1** **A-1** **R-1** **B-1** **I-1** **F-1** FLOOD PLAIN: **YES** **NO**

Application Fee Recvd: $_____ Ck# _____ Rcpt# _____ Treas. Rcpt# _____

APPLICATION: ☐ APPROVED, permit #_____ ☐ NOT APPROVED:_____
_____.

_____
Authorization of Zoning Administrator Date

You have the right to appeal this decision in a Public Hearing before the Zoning Board of Adjustment.