	Draliminam	y Site Evaluatio	n Application	
	aukesha County Departmer land Blvd., Room AC260	nt of Parks & Land Use	e, Environmental Health Division 88 262-896-8300 FAX: 262-896-8298	
Date: Nar	me of Property Owner:	an. sou@waukeshacou	inty-gov	
Property Location:		City, Town, Vil	City, Town, Village of:	
Phone: Email:		Contractor Nar	me:	
Mailing Address & Zip:		Phone: FAX:		
	Improvement			
(Indica)	te the Improvement Option Option A – Please checl			
() Swimming Pool () Woo				
Attach survey, blueprints or plans to this a	pplication showing the dim	ensions and location o	of the proposed improvement on the property.	
	Optio			
() Building Addition and /or remodeling No change in number of bedrooms		() Land Division: Creation of new land parcels that include an existing building		
Provide a description of the building and/or remodeling project.		served by a private sewage system.		
Provide a description of the building and/or remodeling project.		Provide a survey showing the proposed land division, building		
location and the location of septic tank and soil absorption areas. Option C				
		 () Public/Commercial: Building addition and/or remodeling that will result in an increase, decrease or change of building use or operation. Please check the appropriate box below: 		
Existing number of bedrooms:		Increase in Building Usage: 🗌 Same Usage: 🗌		
Proposed number of bedrooms:		Decrease in Building Usage: Change of Use:		
Provide a description of the building and/or remodeling project. Attach a survey, blueprints and/or plans of the proposed improvement or development to this application.				
table or bedrock condition. Assuring proper groundwater. If the soil profile evaluation s code complying private sewage system sha	siting and installation of pri hows that the private sew Il be ordered installed reg	vate sewage systems v age system is installe ardless of whether a	ed in unsuitable soils, it is understood that a building permit is issued.	
Private sewage systems that are "failing" by replaced with a code complying private sewa		ground surface or back	ting up into the building will be ordered	
By signing this form, I state that I am the p	property owner; I have rea entative to enter my prop	erty to determine tha	nt and agree to its conditions. I also give at the proposed improvement complies with	
Printed Name of Property Owner		Proper	rty Owner Signature	
FEES: To be submitted with application	Make Checks "Waukesha	County"	For Department Use Only: Received By: Date:	
Option "A" \$55.00	For improvements or r		Fees Due: Fees Paid:	
Option "B" \$70.00	involving more than or		WCZoningJurisdiction: Yes No	
Option "C" \$85.00	will be based on the greater amount.		Current on Maintenance: Yes No	

Current on Maintenance:

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No

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