

LINCOLN COUNTY ZONING
801 N. SALES ST, STE 103
MERRILL, WI 54452
(715) 539-1087

RECEIVED

SEP - 2 2025

LINCOLN COUNTY LAND USE
PERMIT APPLICATION

**Application must be filled out completely and returned
with payment in order for staff to review**

PERMIT: L-25-288

PROPERTY OWNER INFORMATION	
Owner(s)	<u>Michael Schielke</u>
Mailing Address	<u>N3790 Schielke Rd</u>
City, State, ZIP	<u>Gleason, WI 54435</u>
Telephone	Cell: <u>262-353-6913</u> Home: _____
E-Mail (optional)	_____

CONTRACTOR/BUILDER INFORMATION	
☐ UNKNOWN ☐ SELF	
Name	<u>Leave it to Brian LLC</u>
Address	_____
City, State, ZIP	_____
Telephone	_____

BUILDING SITE LOCATION	
Site Address: <u>N3790 Schielke Rd</u>	If you do not have one, you are required to apply Application Date: _____
Section: <u>13</u> Township: <u>32</u> North Range: <u>8</u> East Acres: <u>40-</u> Zoning District: <u>RL-4</u>	
Government Lot _____ OR <u>SW 1/4 SW 1/4</u>	Additional Info: (Lot, Block, Subdiv, CSM, etc)

PLEASE SPECIFY ALL STRUCTURES YOU WISH COVERED BY THIS PERMIT			
CONSTRUCTION IS (check below)	TYPE OF STRUCTURE (check below)		
☐ New Principal Structure	☐ Dwelling <u>x</u>	☒ Garage <u>40'x60'</u>	☐ ATTACHED ☐ DETACHED
☒ New Accessory/Addition	☐ Porch <u>x</u>	☐ Storage Building <u>x</u>	
☐ Commercial/Industrial	☐ Deck <u>x</u>	☐ Farm Building <u>x</u>	
☐ Other _____	☐ Addition <u>x</u>	☐ Other <u>x</u>	
Explain Addition: _____		Explain Other: _____	

IF A DWELLING: Dwelling will be ☐ Year Round ☐ Seasonal

ARE ANY STRUCTURES LISTED ABOVE LOCATED IN: (circle choices)	
Shoreland: <u>No</u> Yes → Water Body: _____	☐ Property has water frontage
Floodplain: <u>No</u> Yes _____	Wetland: <u>No</u> Yes _____

CONSTRUCTION DETAILS		
FOUNDATION: (check below)	STRUCTURE: (check below)	LIVABLE AREA: (if applicable)
☐ Below Grade Basement	☐ Manufactured/Mobile Home. Year Built _____	Existing Livable Area _____ sq. feet
☐ Walk-Out Basement	☐ Frame/Modular	New Livable Area _____ sq. feet
☒ Slab	☐ Other _____	
☐ Other _____	MAXIMUM BUILDING HEIGHT: _____ ft	# of Current Bedrooms _____
☐ None		# of New Bedrooms _____

PLEASE COMPLETE THE OTHER SIDE

Owner Schielke Last Name
First Name Michael
Tax Parcel # 022-3208-133-9995
Town Schley

PLEASE READ AND SIGN

The undersigned hereby makes application for a Land Use Permit for the work described and located as shown herein. The undersigned agrees that all work shall be done in accordance with the requirements of the Lincoln County Zoning Ordinance and with all other applicable County Ordinances and the laws and regulations of the State of Wisconsin. I declare that the information that I am supplying is true and accurate to the best of my knowledge and I acknowledge that this information will be relied upon for the issuance of this permit. By signing this application I am also granting permission to the zoning department staff to enter my property at any reasonable time for the purpose of inspection to assure compliance with the zoning laws relative to the issuance of this permit.

I acknowledge that I am responsible for complying with State and Federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. I understand that failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Department of Natural Resources web page (<http://dnr.wi.gov/wetlands/locating.html>) or contact a DNR Service Center.

I acknowledge the following:

- No work on a structure or facility requiring a private sewage system shall begin until a Sanitary Permit has been issued according to Chapter 145.195(1) Wisconsin Statutes and Chapter 17.8.50 Lincoln County General Code.
- No work on a structure or facility requiring a Land Use permit shall begin until a Land Use Permit has been issued.
- All Land Use Permits expire two (2) years from the date issued.
- Building permits are required for the construction of new dwellings or additions to dwellings.

Property Owner Signature:

Date:

Michael A. Smith

9/1/25

All requested structures, lot lines, and grading or clearing areas **MUST BE STAKED & FLAGGED PRIOR TO ZONING DEPARTMENT ON-SITE VISIT.** (If setbacks cannot be confirmed it will delay issuing the permit. If a second visit is required, a Return Inspection Fee may be incurred.)

PLEASE ATTACH A SEPARATE 8 1/2" X 11" PLOT PLAN DRAWING

A detailed drawing of the plot plan MUST be given. Include on the drawing ALL of the information requested below. (Our office recommends, but does not require, drawing your plot plan directly onto an aerial printout of your property. You can print them at no charge through our GIS mapping available online or you can request one from our office at no charge.)

1. Shape of parcel, include all lot line dimensions.
2. Indicate which direction is North.
3. Show the location and names of all surrounding roads/highways.
4. Show the location and names of all area water bodies (lakes, rivers, creeks, ponds, etc.)
5. Indicate any wetlands or floodplain on property.
6. Show the location of the (new) construction on the parcel. Include the following measurements:
 - a) Distance from the centerline of any/all roads.
 - b) Distance from the right-of-way of any/all roads.
 - c) Distance to all lot lines.
 - d) Distance to any/all water bodies.
7. Indicate ALL other existing buildings on parcel with "EB".
8. Indicate distance from septic tank or holding tank to proposed construction.
9. Indicate distance from septic system drain field to proposed construction.
10. Indicate distance from well to proposed construction.
11. (If on water) Indicate proposed clearings within the shoreland buffer [allowed corridor - 35' for every 100' of frontage (35%)].

THIS BOX FOR OFFICE USE ONLY

Fee: \$ 150 -

Receipt: 18571 (1086)

Inspected By: *MH (via GIS)*

Date Inspected: 9-3-25

Density (if applicable): *N/A*

Permit Application: ☐ Approved ☒ Denied

Staff Signature: *[Signature]*

Date: 9-4-25

Conditions of Permit:

- PERMITTED AS SHOWN ON SITE PLAN.
- MEETS ALL SETBACKS.
- STRUCTURE NOT TO BE USED FOR HABITATION, COMMERCIAL, OR INDUSTRIAL LAND USE; WITHOUT FIRST ☒ See Attached Permit Card OBTAINING ZONING APPROVAL.

Other Permits Needed:

Permit Type	Required/Received	Number
Sanitary	/	
Conditional Use	/	
Soil Disturbance	/	
Other:	/	

02232081339991

SCHIELKE
FARM LLC

02232081339990

SCHIELKE
FARM LLC

Town of
Schley

T32N R8E

MICHAEL
SCHIELKE

02232081339995

0 37.5 75 150 225 300 Feet

Lincoln County, WI

Author:

Date Printed: 8/28/2025



The information depicted on this map is a compilation of public record information including aerial photography and other base maps. No warranty is made, express or implied, as to the accuracy of the information used. The data layers are a representation of current data to the best of our knowledge and may contain errors. It is not a legally recorded map and cannot be substituted for field-verified information. Errors should be reported to the Land Services Department, 801 North Sales St, Merrill, WI, 54452. Phone (715) 539-1087.