



223207 Abt Road, Ringle, WI 54471  
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Town Website: <https://townofringlewi.com/>

## **Wrecking Permit Application**

**(Submit 2 hard copies and 1 electronic copy of plans/drawings)**

**Property Owner(s):** \_\_\_\_\_

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

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Applicant (if other than Owner):** \_\_\_\_\_

Check: Architect \_\_\_\_\_ Engineer \_\_\_\_\_ Surveyor \_\_\_\_\_ Attorney \_\_\_\_\_ Agent/Other \_\_\_\_\_

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

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Signature and Certification:**

*The, below-signed, hereby make application for a wrecking permit for the work described and located as shown herein. The below-signed agrees that all work shall be done in accordance with the requirements of the Town of Ringle Zoning Ordinance along with all other applicable town ordinances and the applicable laws and regulations of Marathon County and the State of Wisconsin. I declare that the information 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 granting permission to the Town of Ringle staff and elected/appointed officials 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.*

Owner (or owner's agent) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Signature (if other than owner): \_\_\_\_\_ Date: \_\_\_\_\_

**Contractor (if applicable):**

Contractor: \_\_\_\_\_

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

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Wrecking Plan/Project Specifics:**

Site Address: \_\_\_\_\_

Tax Parcel No.(s): \_\_\_\_\_

Description of Building/Structure to be Demolished/Removed: \_\_\_\_\_

Start & End Dates of Demolition/Removal: \_\_\_\_\_

Have all utilities having service connections with the subject building/structure been notified? Yes \_\_\_\_\_ No \_\_\_\_\_

Description of how utility connections (e.g., meters and regulators) will be removed or sealed/plugged in a safe manner:

\_\_\_\_\_  
\_\_\_\_\_

Description of how and where all rubble, rubbish, and other debris will be disposed of: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Description of how disturbed site will be reclaimed (e.g., graded, revegetated, etc.): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Shoreland, Floodplain, and Wetland Review:**

Is the building/structure located in a “shoreland”? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the building/structure located in a floodplain? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the building/structure located on the same parcel or within the general vicinity of wetlands or wetland indicators? Yes \_\_\_\_\_ No \_\_\_\_\_

Notes:

- “Shoreland” means lands within the following distances from the Ordinary High Water Mark of navigable waters: 1,000 feet from a lake, pond or flowage; and 300 feet from a river or stream or to the landward side of the floodplain, whichever distance is greater.
- Locations of “shoreland”, floodplain, and wetland areas may be viewed on the Marathon County GIS Mapping Application. Locations of wetlands and wetland indicators may be viewed on the Wisconsin Department of Natural Resources Surface Water Data Viewer.
- Projects within “shorelands” and floodplains shall comply with the Marathon County Shoreland, Shoreland-Wetland, and Floodplain Code and may require permit(s)/approval(s) from Marathon County

**Site Plan Submittal Requirements:**

Site Plan is required, showing the building(s), structure(s), or part(s) thereof being wrecked, demolished, razed, or removed.

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Fee: \_\_\_\_\_ Acct No: \_\_\_\_\_ Receipt: \_\_\_\_\_ Date: \_\_\_\_\_

Date Rec'vd Complete: \_\_\_\_\_ By: \_\_\_\_\_ Application/Permit No.: \_\_\_\_\_

**Decision:**

Permit is: Issued \_\_\_\_\_ Denied \_\_\_\_\_

Condition(s) of issuance (if any):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Reason(s) for denial: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Zoning Administrator/Town Official Signature: \_\_\_\_\_ Date: \_\_\_\_\_