

# Request for Setback Staking

**\*\*Setback staking good for 1 year from date of staking\*\***



## PART A

Parcel Pin Number: \_\_\_\_\_

Parcel Address: \_\_\_\_\_

Legal Description of Parcel: \_\_\_\_\_

\_\_\_\_\_

Town of \_\_\_\_\_

Requested by: \_\_\_\_\_

Do you want to be on-site during staking?     YES     NO

Return Address: \_\_\_\_\_

Day Phone: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Email \_\_\_\_\_ Cell \_\_\_\_\_

**Property Owner Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## PART B

Requesting: (Check all that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> 75 building setback        | <input type="checkbox"/> Side Yard setbacks ( <b>Property corners must be marked</b> ) |
| <input type="checkbox"/> 35 foot Vegetation Setback | <input type="checkbox"/> Averaged Shoreland Setback (Complete Part C)                  |
| <input type="checkbox"/> Road Setback               | <input type="checkbox"/> Averaged Road Setback (Complete Part C)                       |
| <input type="checkbox"/> Boathouse                  | <input type="checkbox"/> 50' POWTS Setback from OHWM/Well                              |

## PART C (**ONLY** if requesting average setbacks)

Permission for county staff to measure adjacent property principle structure setbacks for averaging.  
**(Adjacent owners must fill out section or have a signed letter attached)**

Pin # \_\_\_\_\_ or  
Site Address: \_\_\_\_\_

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

As owner of the above stated property I give permission to the Marathon County Conservation, Planning & Zoning staff to enter onto the property to measure setbacks to the principle structure for the purpose of setback averaging for adjacent property.

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Property Owner (Print): \_\_\_\_\_

**Signature:** \_\_\_\_\_

Date: \_\_\_\_\_

Property Owner (Print) \_\_\_\_\_

**Signature:** \_\_\_\_\_

Date: \_\_\_\_\_

### \*\*\*\*\*OFFICE USE ONLY\*\*\*\*\*

- \$175.00 Staking Fee **payable to Marathon County**
- Staking completed – Date: \_\_\_\_\_
- Staking completed by: \_\_\_\_\_
- Staking letter sent – Date: \_\_\_\_\_

- Receipt Number: \_\_\_\_\_
- Zoning** permit application sent \_\_\_\_\_
- Shoreland** Alteration permit application sent \_\_\_\_\_