

CERTIFICATE FOR AGRICULTURAL BUILDINGS

La Crosse County Zoning, Planning & Land Information

La Crosse County Administrative Center

400 4th Street North • Room 3170 La Crosse, Wisconsin 54601-3200

Telephone: (608) 785-9722 Fax: (608) 785-5922 www.co.la-crosse.wi.us/zoning



- **DEFINITION OF AGRICULTURAL BUILDING:** A building constructed or used solely for agricultural use.



- **LANDOWNER INFORMATION**

Name: _____ Phone: _____

Mailing Address: _____

City, State Zip: _____ Tax Id#: _____



- **PROPOSED AGRICULTURAL BUILDING**

Size: ____X____ Type of construction: _____ Approximate ground disturbance _____sq. ft.



- **USE OF PROPOSED AGRICULTURAL BUILDING**

House livestock: Y/N

House poultry: Y/N

Store livestock feed: Y/N

Store poultry feed: Y/N

Store farm implements: Y/N

Store fruit: Y/N

Store hay: Y/N

Store grain: Y/N

Other: _____

Other: _____

IF YOU ANSWERED YES TO HOUSING LIVESTOCK OR POULTRY CALL LAND CONSERVATION 608-785-9867 



- **A ZONING OCCUPANCY PERMIT IS REQUIRED IF YOU ANSWER YES TO ANY OF THE FOLLOWING**

- Will the structure be located on less than 35 acres of contiguous land under common ownership or within a zoning district other than a Farmland Preservation Zoning District? Y/N

- Will the structure be used for personal storage at any time (personal vehicles or personal items other than those relating to agricultural uses)? Y/N

- Will the structure be used for human habitation? Y/N

- Will the structure be located within 300 feet of the ordinary high water mark of a creek, river or other body of water? Y/N

IF MAILING THIS CERTIFICATION APPLICATION, INCLUDE A SITE PLAN DEPICTING THE PROPOSED BUILDING AND ACCURATE MEASUREMENTS FROM ESTABLISHED BENCHMARKS (i.e. other existing buildings, public roads, bodies of water, etc...)



- **APPLICANT AGREEMENT**

I the undersigned, acknowledge that the information provided is accurate to the best of my ability. I certify that the proposed structure is an Agricultural Building. I take full responsibility for obtaining all necessary permits, including any federal, state, county, and/or town permits. I understand that all structures must meet the required setbacks per federal, state, county, and/or town regulations. I will allow representatives from the La Crosse County Zoning, Planning and Land Information Department to access my property to inspect the project's construction, operation, and/or maintenance.

Signature of Landowner
(Contractor or representative of the landowner is not authorized to sign)

Date

- **ZONING APPROVAL**

A Zoning Occupancy Permit is not required _____

Zoning Authority

Date