JACKSON COUNTY ZONING APPLICATION INFORMATION

1. **Fill out the Jackson County Zoning Application**. If you need help finding information to complete your application, you can find property information on the Beacon website for Jackson County, IA or contact the Zoning office at: 563-652-4512 or Iroling@jacksoncounty.iowa.gov.

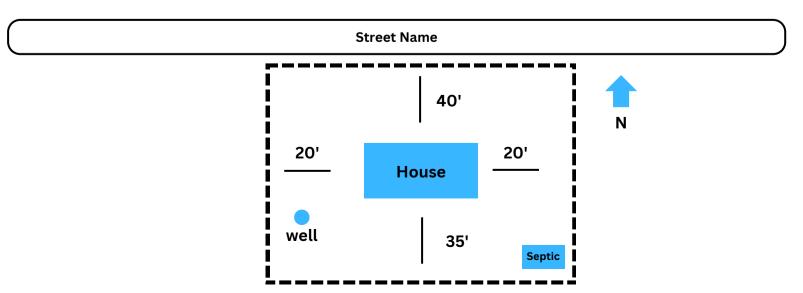
Lot size and yard requirements can be found in the table below:

Jackson County Zoning District Lot Size Regulations								
Zoning Dist	rict	Minimum Lot Size	Frontage	e Setbacks			Height	
				Front	Side	Side Street for Corner Lot	Rear	
Agricultural	A-1	2 acres	200'	40'	15'	30'	30'	2.5 stories or 35'
Residential	R-1	20,000 sq. ft	100'	30'	10'	25'	35'	2.5 stories or 35'
Highway Commercial	C-1	As required by Health Dept. to provide proper sewage treatment		30'	20'	30'	25'	2.5 stories or 35'
Limited Industrial	M-1	As required by Health Dept. to provide proper sewage treatment		30'	20'	25'	25'	4 stories or 50'
General Industrial	M-2	As required by Health Dept. to provide proper sewage treatment		30'	20'	25'	25'	4 stories or 50'

^{*} Detached accessory structures have a required rear setback of 5', all other required setbacks remain the same

- 2. Submit a to scale site plan that includes:
 - a. Property line boundaries
 - b. Existing structures (labeled)
 - c. Proposed structures (labeled
 - d. Dimensions of proposed structures
 - e. Distance from the proposed structure to the property line
 - f. A north arrow
 - g. The nearest street or road used to access the site

Example of site plan:



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3. If applicable, submit a building plan, example:



Building Elevation



Floor Plan

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4. Application fee payable by cash or check. Checks should be made payable to: Jackson County Zoning. Fees are listed below.

Regular Zoning Permits	Fees		
Principal Use Structure	\$150		
Addition to Principal Use Structure	\$75		
Accessory Use Structure	\$75		
Addition to an Accessory Use Structure	\$75		
Flood Plain Management Permits	Fees		
Principal Use Structure	\$150		
Accessory Use Structure	\$75		
Board of Adjustment Cases	\$250		
Zoning Commission Cases	\$250		
Subdivision Plat Submittal	Fees		
Minor subdivision plats	\$150		
Major subdivision plats - preliminary	\$350		
Major subdivision plats - final	\$350 + \$20 per lot + inspection fees		
Any redrawn, resubmitted plats of Major and Minor Subdivisions	\$50		
Any Communication Tower	\$400		
Home/Farm Occupation or Industry	\$75		

ALL APPLICATION FEES ARE DOUBLED IF THE PROJECT WAS STARTED BEFORE THE APPLICATION WAS APPLIED FOR OR ISSUED.

JACKSON COUNTY ZONING

FOR ZONING OFFICE USE ONL	Y – APPLICATI	ON SUBMITTA	L CHECKLIST	
Fee: Site Plan Date:	BOA Do	ocket #:	ZC Case #:	Permit #:
Indicate Permit Application: ZONING ADMINISTRATOR Zoning Permit: Primary Structur Zoning Permit: Accessory Struct Zoning Permit: Addition to Prim Zoning Permit: Change in Use/N Zoning Permit: Communication Home Occupation Temporary Use Permit Farm Exemption Construction Compliance Certification Occupancy Compliance Certification	ture/Use ary Use New Use Tower cate	ZONING COMMISSIC Rezoning Text Ame PUD Preli PUD Final SUBDIVISIC Major Final Minor Final	ndment minary ONS ry Plat al Plat al Plat	BOARD OF ADJUSTMENT Special Exception Variance Appeal WILL PROJECT HAVE: Additional Plumbing Water or Sewer Hookup
Please type or print legibly in i	n <u>k</u>			
Property owner(s):		P	hone:	
Address:	City:		State:	Zip:
Cell #:E	-mail:	_		
Applicant/Agent:		P	hone:	
Address:	City:		State:	Zip:
Cell #:	E-mail:	_		
Site location/address:			Exis	ting zoning:
Brief Legal Description:				
Parcel ID Number(s):		Est	imated Project Co	ost:
Existing use(s):	Proposed	l Use(s):		
Describe proposed project (attach	a letter of explar	nation, if needed)): <u> </u>	

Site Dimensions (see sample): Lot Width (feet): Lot Depth (feet):					
Total Area (square feet or acres): Lot	e (feet):				
See Required Setbacks for Zoning District:					
Primary Use: Setbacks (feet): Front Side 1	Side 2 F	Rear	_ Height (feet):		
Accessory Use: Setbacks (feet): Front Side 1	Side 2	_ Rear	Height (feet):		
CERTIFICATION : I/we, the undersigned, with respect do hereby certify/acknowledge that:	to the above info	ormation pro	ovided in this application,		
1. It is the property owner's responsibility to locate property lines and review the abstract for easements and restrictive covenants;					
2. It is the property owner's responsibility to apply to County Engineering for an E911 address and driveway entrance permit;					
3. It is the property owner's responsibility to apply to County Health for well and septic system permits;					
4. The information submitted is true and correct to the best of my/our knowledge and upon submittal becomes public record; and					
5. Fees are not refundable and payment does not guarantee approval.					
Property Owner:	_ Date:				
Property Owner:		_ Date:			
Applicant/Agent:		Date:			

Return completed application with fee and any other required materials to:

Lori Roling, Zoning Administrator Jackson County Zoning Department 201 W Platt St, Maquoketa, IA lroling@jacksoncounty.jowa.gov

Phone: 563-652-4512

JACKSON COUNTY SPECIAL EXCEPTION QUESTIONNAIRE

Home Occupation/Home Industry and Change in Use:

Describe existing uses/structures:							
2. Describe proposed new uses/structures:							
3. Describe the following site characteristics and proposed	d changes (if applicable):						
a. How property is accessed from the public road:							
b. Parking, loading and service areas:	Parking, loading and service areas:						
c. Potential impacts on nearby properties (noise, odd	or, dust, traffic, drainage, etc.) from proposed uses:						
d. Existing and proposed utilities (types, locations, ac	dequacy):						
e. Existing and proposed hedges, fences, buffers:							
f. Existing and proposed signs:							
g. Type, location, direction of exterior lighting:							
h. Compatibility with surrounding properties:							
Setbacks :							
Describe existing uses/structures:							
2. Describe proposed new uses/structures:							
3. Describe the following site characteristics and proposed	d changes (if applicable):						
a. How property is accessed from the public road:							
b. Parking, loading and service areas:							
c. Existing and proposed utilities (types, locations, ac	dequacy):						
d. What setbacks are being requested and why:							
CERTIFICATION: I/we, the undersigned, with respect to questionnaire, do hereby certify/acknowledge that the infimy/our knowledge and upon submittal becomes public re-	ormation submitted is true and correct to the best of						
Property Owner:	Date:						
Property Owner:	Date:						
Applicant/Agent: Date:							

Return completed questionnaire with Zoning Application, fee, and other required materials to:

Lori Roling, Zoning Administrator Jackson County Zoning Department 201 W Platt St, Maquoketa, IA Email: lroling@jacksoncounty.iowa.gov

Phone: 563-652-4512