



**ORIGINAL LOADING ZONE APPLICATION**  
(Pursuant to sections 11.32.310 & 12.32 of the City of Wauwatosa Code)  
(License Year: January 1 through December 31, 20\_\_)

Date: \_\_\_\_\_ WI Driver's License # \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Agent: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Description of Location: \_\_\_\_\_  
\_\_\_\_\_

Lineal Foot Distance: \_\_\_\_\_

Number & type of vehicles to be accommodated: \_\_\_\_\_  
\_\_\_\_\_

Nature of materials, articles or commodities to be loaded and unloaded at such location: \_\_\_\_\_  
\_\_\_\_\_

01-311-4230-000

FEE: \$30.00 annually for any loading zone extending not more than 30 feet in length.  
PLUS: \$1.00 for each lineal foot in excess of 30 feet.

I hereby agree to comply with the City of Wauwatosa Code and all regulations or ordinances subsequently declared or adopted by the Common Council of the City of Wauwatosa.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Engineering Dept.