TOWN OF SIGEL WOOD COUNTY WI APPLICATION FOR RE-ZONING AND COMPREHENSIVE PLAN MAP AND/OR TEXT AMENDMENT

() GRANT () DENY	FEE: \$300.00 FOR SPECIAL MEETING
assigned to a specific property (and the re-zoning are both acco submitted with the application the date and place of the meeting amendment/zoning change and	endment is a change or revision to a land use map designation or properties). Applications for plan map/text amendments mplished with this form. Application fee must be tion and is not refundable. Applicant will be notified of ngs and the public hearing for this proposed it is mandatory that applicants and owners attend all lated to the amendment/zoning request.
1. Applicant Information	
Applicant	Telephone
Address	
Email Address	Fax
2. Owner Information (If differen	ent than applicant)
Owner	Telephone
Address	
Email Address	Fax
3. Correspondence Address (Th materials will be forwarded)	is is the address to which all agendas, Letters and other
Name	Telephone
Address	
Email Address	Fax
	WNER() AGENT () OTHER () r, provide a letter of Authorization from ALL Property Owners)
5. The present Owner acquired	legal title to the subject property on
	(Date)
6. Property Location & Address	

7. Parcel I.D. Number is
8. Parcel Size/Dimension (Square Feet/Acres)
9. Existing Use of Property
10. Existing Future Land Use of Property (Future Land Use Map Designation)
11. Proposed Future Land Use (by Applicant)
12. Existing Zoning
13 Proposed Zoning Change (If Applicable)
14. Surrounding Future Land Use/Zoning Classification/Existing Use
15. On a separate sheet of paper, please thoroughly address the following:
 a. Why the comprehensive plan map amendment/zoning change is being proposed. b. Justification and support for the proposed map amendment/zoning change. Examples might include a discussion of changes that have occurred in the area of the proposed plan map amendment since the comprehensive plan's adoption, consistency of the proposed amendment with the adopted comprehensive plan and/or how the proposed change will benefit the community.
16. Please attach (preferable on 8.5"x11" or 11"x17" paper) the following:
 a. A vicinity map b. An accurate map showing the specific parcels subject to the amendment request; c. Any additional information that you believe supports your request. d. Include list names and addresses of landowners within 1000 feet of proposed zoning change.
I hereby depose and say that all the above statements and all accompanying statements and drawings are correct and true.
(Signature of Applicant)

APPLICANT ATTENDANCE AT THIS HEARING IS MANDATORY!