

Date Filed _____
Amount Paid _____
Check No. _____
Revised 10/12/2009

**TOWN OF WESTON
MARATHON COUNTY, WI
APPLICATION FOR REZONING**



Fee: \$280.00 Regular Meeting

One copy of a registered surveyor's plat of survey **must** accompany application. Applicant will be notified of the date and place of a public hearing.

1. Applicant _____ Telephone _____
Address _____
2. Owner _____ Telephone _____
Address _____
3. Applicant is (Check one): Owner () Agent () Other () _____
(If Applicant is not the owner, provide letter of Authorization from Owner) (Specify)
4. The present Owner acquired legal title to the subject property on _____
(Date)
5. Location, address and acreage of property: _____

6. Legal description of subject property: _____

7. Present Zoning: _____
8. Proposed Zoning change: _____
9. Has the present applicant previously sought to rezone the subject site or part of it? _____
10. When? _____
11. To what district classification? _____

- 12. Existing Use of Property: _____
- 13. Future Land Use Map Designation of Property: _____
- 14. Proposed Future Land Use (by Applicant): _____
- 15. Is the subject property planned to be improved? _____ When? _____
- 16. What will be the actual use of the improvement? _____

I hereby depose and say that all the above statements and all accompanying statements and drawings are correct and true.

Signature of Applicant

Forwarded to the Town Plan Commission Date: _____

Date of Public Hearing: _____

Recommendation of the Town Plan Commission: _____

NOTE: This is only a recommendation. It requires action by the Town Board & County Board to become effective.

Forwarded to the Town Board Date: _____

Forwarded to the County Board Date: _____

Map Amendment: (Adopted / Denied) Date: _____

Ordinance Publication Date: _____

 Town Chairman