

Date Filed _____
Amount Paid _____
Check No. _____
Revised 10/25/2007

**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 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. Is the subject property planned to be improved? _____ When? _____

13. 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

Applicant attendance at this hearing is not mandatory, but is strongly recommended.

State of _____

County of _____

Subscribed and sworn to before me this ____ day of _____, 20 _____, by

_____.

Notary Public

(Seal)

My Commission Expires: _____

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