

\$400.00 FEE

VILLAGE OF ASHWAUBENON

**REZONING PETITION
ZONING MAP AMENDMENT APPLICATION**

1. Applicant or Agent

Name _____
Address _____

Telephone () _____

Property Owner

Name _____
Address _____

Telephone () _____

2. Address of premise _____

3. Request for Rezoning from _____ **to** _____

4. Parcel number VA _____

5. Legal description: Subdivision and lot number, certified survey map, metes and bounds. (Attach additional sheet if necessary)

6. Reason for rezoning request

7. Please attach the following items to this application.

- A. A plot drawn to a scale of one inch equals one hundred (100) feet showing the area to be rezoned, its location and its dimensions.
- B. A copy of the current zoning for properties adjacent to this site.
- C. The location and existing use of all properties within two hundred (200) feet of the area proposed to be rezoned.
- D. Any additional information as requested by the Village Zoning Administrator.

8. More information may be requested by the Village Plan Commission and Village Board if deemed necessary to properly evaluate your request. The lack of information requested by this form may in itself be sufficient cause to deny the petition. If you have any question regarding the amendment process, please contact the Village Zoning Administrator.

9. Applicant's Verification of Information

I hereby certify that all the above statements and attachments submitted hereto are true and correct to the best of my knowledge and belief.

Dated this _____ day of _____, 20__.

Owner

Agent or Applicant

Office use
Date Filed _____

Public Hearing Date _____

Publication Dates _____

Return to:
Village Clerk
Village of Ashwaubenon
2155 Holmgren Way
Green Bay, WI 54304