



APPLICATION: ZONING CHANGE REQUEST FORM

To: Planning Commission, City of Kaukauna, Outagamie County, WI

Petitioner Information:

Name:

Mailing Address:

Phone Number:

Email:

Property Owner Information (If Not Petitioner):

Name:

Mailing Address:

Phone Number:

Email:



Property Information:

Site Address/Location:

Lot Dimensions and Area:

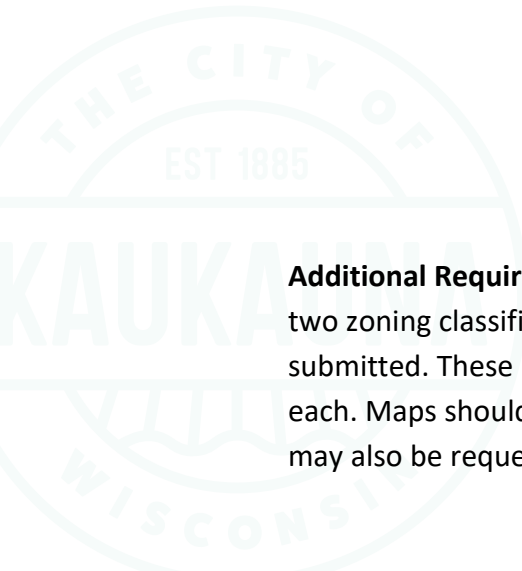
Current Zoning:

Current Uses:

Proposed Zoning:

Proposed Uses:

Please State Reason(s) for Rezoning Request:



Additional Requirements: For zoning change requests that would result in split zoning (or two zoning classifications on one parcel), professionally drawn maps are required to be submitted. These maps must include all structures, lot lines, and streets with distancers to each. Maps should be drawn to a scale of not less than 1":1,000'. Additional information may also be requested as may be appropriate per the proposal being made.

Rezoning/Zoning Change Fee Schedule: \$100.00

Please Note: Changes to zoning ordinances often require action by multiple governmental bodies. Between multiple meetings and statutory requirements for public hearings and noticing of meetings, sometimes reviews and authorizations can take more than 30 days. Please let staff know of your request as early as possible if you have a specific deadline that you need Plan Commission authorization by.

Signature of Petitioner:

Signature of Owner (If Not Petitioner):

Date Submitted to City of Kaukauna:

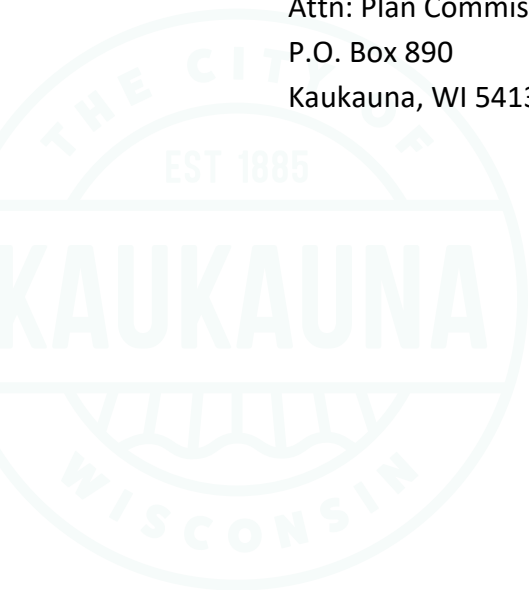
Please submit by email to planning@kaukauna.gov or by mail to:

City of Kaukauna

Attn: Plan Commission

P.O. Box 890

Kaukauna, WI 54130



FOR DEPARTMENT USE ONLY:

Date Application Received:

Payment Received:

Payment Receipt #:

Site Plan Reviewed:

1st Notice Sent:

2nd Notice Sent:

Plan Commission Approval:

Common Council Approval:

Signature of Planning & Community Dev. Staff:

