





Petitioner Information:
Name:
Mailing Address:
Phone Number:
Email:
Property Owner Information (If Not Petitioner):
Name:
Mailing Address:
Phone Number:
Phone Number:

Property Information:
Site Address/Location:
Lot Dimensions and Area:
Current Zoning:
Current Uses:
Proposed Uses:
Please State Reason(s) for Special Exception Request:
What procedures will be used to prevent any ill effects to neighboring properties such as (but not limited to) parking, noise, or additional traffic:
Please list the operating hours of the business:
Additional Requirements: Additional information may be requested as may be appropriate

**Special Exception Permit Fee Schedule:** \$100.00

per the proposal being made.

**Please Note:** Special exception permits 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

## Payment Received: Payment Receipt #: Site Plan Reviewed: 1st Notice Sent: 2nd Notice Sent: Plan Commission Approval:

Signature of Planning & Community Dev. Staff:

Common Council Approval:

