Town of Hortonia - Outagamie County, Wisconsin

APPLICATION for CONDITIONAL USE PERMIT

Date: _____

Owner Name: _____

Address: _____

_____

Phone: _____ Email: _____

Applicant Name (if different from Owner): _____

Phone: _____ Email: _____

Property Address (if different from Owner address):

_____

_____

Location of Property: _____ ¼ _____ ¼, Section _____, Tax Parcel # _____

Acreage: _____ Current Zoning: _____

Proposed Zoning (check one): A-1 ____ A-2 ____ RE ____ TRD ____ R-1 ____

M-H ____ C-1 _____ I _____ CAO _____ HCO _____

Specify the Conditional Use being requested: _____

_____

as provided for in Section: _____ of the Zoning Ordinance.

The property is presently used for the following purposes: _____

_____

_____

The Conditional Use Permit is requested so that the property may be used in the following specific manner or for the following specific purposes: _____

_____

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_____

_____

_____

Additional Comments (if any) _____

_____

_____

_____

_____

Application Checklist:
(The Applicant shall submit fifteen (15) copies of the application packet. The Town of Hortonia shall not accept any application for a zoning change until the application packet is submitted in its entirety)

In addition to the CSM and Site Plan (if required), the application packet shall include all of the following *(please check)*:

- One copy of the deed ____
- Boundaries and dimensions of the property ____
- All existing structures ____
- All existing building setbacks ____
- Distances to neighboring buildings and their uses ____
- Location of the well(s) and sanitary system(s) and their distance to lot lines and buildings ____
- All navigable waters, watercourses, wetlands, and drainage ditches and the highwater elevation within 100 feet of land ____
- Proposed location of access to public road ____
- Names of landowners within 500 feet of property ____
- Any applications required by WDNR ____
- Additional information as required by the Plan Commission, Town Board, Outagamie County, or state statute ____

Application Fee:
($300.00)

Check Number: _____

Total Amount: _____

Applicant Signature: _____

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Professional Services: All costs of professional services such as legal, engineering, and planning review; research; recording fees; and traffic control costs related to any action initiated by a responsible party, other than the Town, to be reviewed or acted upon by the Town of Hortonia Plan Commission, Board of Appeals, or Town Board shall pass to the responsible party.