

PETITION FOR CONDITIONAL USE PERMIT

Date of Application _____
Name of Applicant _____
Address _____

Phone # _____

Current Zoning of Property _____

Premises of Conditional Use (Attach Legal Description in Duplicate)

¼ Section, Section _____

Parcel Number from Tax Roles (T11 NO.) _____

Total Acres in Parcel _____

Reason for Petition:

Purpose Use:

How many miles is parcel from city or village boundary? _____

Attach a plan drawn to scale showing the conditional use area; its building, location and dimension: Location and classification of adjacent zoning districts; and location of all property owners' names within 200 feet of the proposed conditional use area.

SIGNATURE OF APPLICANT: _____

1. Submit this from to the Town Clerk with a check in the amount of \$250.00 made payable to The Town of Scott.
2. The Planning Commission recommends action and forwards the results to the Town Board. The Town board will make a decision and return a signed copy to the applicant.
3. The Planning Commission requests, as standard, 2 meeting dates before recommendation to the Town Board. Allow a minimum of 90 days for the approval process. All forms **MUST** be filled out completely before being accepted.

FOR OFFICE USE ONLY:

Planning Commission Recommendation: _____ Date

Signature of Plan Commission Official _____

Town Board Decision: _____ Date

Signature of Town Official _____