## Village of Waldo

Zoning Application

Application Date:\_\_\_\_\_

Rezoning Request	\$200	□ Special Board Meeting	\$130
□ Variance	\$200		
Conditional Use	\$200		

OWNER	AGENT FOR THE OWNER
Name	Name
Address	Address
Signature	Signature
Phone #	Phone #
E-mail	E-mail

## Address of property involved if different than owner's

address:\_\_\_\_\_

Describe the Land/Structures Involved: (use extra paper as needed)

Describe the Proposed Use for the Land/Structures: (use extra paper as needed)

Describe the Variance Requested (Variance Request Only): (use extra paper as needed)

Continued on Back  $\Rightarrow$ 

810 W 2<sup>nd</sup> Street, PO Box 202, Waldo, WI 53093 Water/Sewer Utility: PO Box 6, Waldo, WI 53093 Phone: (920) 528-8121 Website: www.villageofwaldo.com

Current Zoning District: (Circle one)							
А	C-1	C-2	IND	R-1	R-2		
Proposed Change to Zoning District: (Circle one)							
А	C-1	C-2	IND	R-1	R-2		

Office Use Only

Plan Commission Meeting	Date:	□ Approved	Denied
2 <sup>nd</sup> Plan Commission Meeting (if needed)	Date:	□ Approved	Denied
Village Board Meeting	Date:	□ Approved	Denied
Published Legal Notice ** Will be invoiced**	Date:		
Hearing	Date:		
Parcel #	Clerk Signature:		
Fee:	Date Paid:	Check #	