ZONING CHANGE APPLICATION

Permit Fee: $ 550.00	Fee Paid: ☐
Approval Date: / /	

TOWN OF PERRY
9730 COUNTY RD A
MOUNT HOREB, WI 53572
PHONE: 608-444-6425
clerk@tn.perry.wi.gov

Items that must be submitted with your application:

- **Written Legal Description of the Proposed Zoning Boundaries**
  Legal description of the land that is proposed to be changed. The description may be a lot in a plat, Certified Survey map, or an exact metes and bounds description. A separate legal description is required for each zoning district proposed. The description shall include the area in acres or square feet.

- **Scaled Drawing of the Location of the Proposed Zoning Boundaries**
  The drawing shall include the existing and proposed zoning boundaries of the property. All existing buildings shall be shown in the drawing. The drawing shall include the area in acres or square feet.

OWNER	AGENT (Contractor, Coordinator, Other)
NAME	CONTACT NAME
CO-OWNER'S NAME (if applicable)	BUSINESS NAME (if applicable)
MAILING ADDRESS	MAILING ADDRESS
CITY, STATE, ZIP	CITY, STATE, ZIP
DAYTIME PHONE #	DAYTIME PHONE #
EMAIL	EMAIL

LAND INFORMATION

Parcel Numbers Affected:

_____

Section: _____ Property Address or Location: _____

Zoning District Change (To/From/# of acres):

_____

Soil classification:_____

Narrative: (reason for change, intended land use, size of farm, time schedule)

☐ Separation of buildings from farmland
☐ Creation of a residential lot
☐ Compliance for existing structures and/or land uses
☐ Other

_____

_____

_____

_____

EXPLANATION OF THE PROPOSAL - Describe how you would like to change the use of your land

I authorize that I am the owner or have permission to act on behalf of the owner of the property.	
PRINT NAME OF APPLICANT (must be owner or project representative listed above)	
SIGNATURE OF APPLICANT (must be owner or project representative listed above)	**DATE**