

**APPLICATION FOR
CONDITIONAL USE PERMIT
City of Jefferson, Wisconsin**

Date: _____

Fee: \$250

To the Zoning Inspector: The undersigned hereby applies for a Conditional Use Permit as herein described.

Property Description and Address: _____

Zoning District: _____

Type of Structure: _____

Proposed use of site: _____

Applicable zoning ordinance Section 300- _____

Property owners within 100 feet of the property boundaries

Name: _____ Address: _____

Name: _____ Address: _____

Name: _____ Address: _____

Name: _____ Address: _____

Name: _____ Address: _____

Signed: _____ Signed: _____

Owner

Applicant

Address: _____ Address: _____

NOTE:

Attach Plat of Survey showing the location, boundaries, dimensions, elevations, uses and size of the following: subject site, existing and proposed structures; existing and proposed easements, streets and other public ways; off street parking, loading areas, and driveways; existing highway access restrictions; existing and proposed front, side and rear elevations in color; drainage ways; retention areas; two foot contours; landscaping and any other information pertinent for complete understanding of the need and purpose of the Conditional Use.