CITY OF WAUSAU APPLICATION FOR ZONING MAP AMENDMENT

If you are requesting a zoning map amendment, please provide the following information. Note that a different application is required if you are requesting a conditional use and additional information is required if you are requesting Planned Unit Development District zoning. Should you have any questions about this form or the City's rezoning process, please call 715-261-6780 (Zoning) or 715-261-6760 (Planning).

1. Primary petitioner's Name (PRINT):

Primary petitioner's Address (PRINT):

Primary petitioner's Telephone Number (with Area Code):

Primary petitioner's representative to contact in case of questions about this petition:

(Name – PRINT)		
(Address - PRINT)		
(Telephone No. with Area Code)	Email Address	
Names of additional petitioners, if any:		
(PRINTED Name)	(PRINTED Name)	
(PRINTED Address)	(PRINTED Address)	
(Telephone No. / Email Address)	(Telephone No. / Email Address)	

2. Name, Address, and Telephone Number of EACH additional property owner within the area proposed to be rezoned. If the primary petitioner owns <u>all</u> of the property proposed to be rezoned, merely indicate "NONE." (Add an additional page, if necessary)

Name (PRINT):		
Address (PRINT):		
Phone No.:	Email Address:	

Name (PRINT):		
Address (PRINT):		
Phone No.:	Email Address:	

- 4. A. Existing zoning district classification(s) of the land included within the petition:
 - B. **Proposed** zoning district classification(s) of the land included within the petition:
 - C. Existing land uses on land included within the petition:
 - D. Proposed land use(s) following rezoning:

- 5. Please provide a brief narrative justifying the rezoning of this property. (Attach an additional sheet if necessary):
- 6. Please attach a map of the area showing the parcels proposed to be rezoned, adjacent streets, existing zoning on the parcels, and other information you feel might be helpful in evaluating your proposal.

Signature of Petitioner: _____ Date: _____

IF ADDITIONAL PAGES ARE NEEDED, PLEASE ATTACH HERETO

Please return this completed form with the information indicated above and the publication fee of \$400 to the City Planning Office (or the Department of Inspections) located in Wausau City Hall, 407 Grant Street, Wausau WI 54403.

Checks should be made payable to "City of Wausau".

Please note: ⇒The fee for a requested **special Plan Commission meeting** is **\$550.** ⇒ All fees are subject to increase each year on January 1.

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For City Use Only	Date received at City Hall:
Received by:	
Amount submitted with application: \$	Check Number:
Month requested for public hearing:	
Requested Common Council meeting	date for final approval:
Notes:	

ZoneChangeApp.frm Revised: January 26, 2021