## **TOWN OF WAUSAU VARIANCE APPLICATION**

## **Board of Adjustment Appeal**

Property Owner:				
Address:				
City, State, Zip:				
Telephone:	Home:	Business:	Cell:	
Email:				
Contact Person:				
Telephone:	Home:	Business:	Cell:	
Tax Key Number:				
Zoning District:	R1/20AT 1/40	A 1/80CM 1	_Multi Family	
Nature and disposition	of any prior petition for		itional use	
Description of all nonce		nd use on the property:		We), being <del>first duly</del>
Terms of Ordinance (re		on #)		twell and of noticelloc does be to trougue
Variance Requested:_		.A. arli taorih bim esinodiu		ndse, Hwy (Sun
		application materials (atta		y (our) behalf. wther, I (v) as Corre
Compliance with the te	erms of the ordinance is	s prevented by unique featu		Immistrator for the T
A variance will not be o	contrary to the public in	terest because	tanus/	eme of Pr <del>operty Gwr</del>
Attach construction pla	ns detailing	and the available baths	unaise has at arous seu te	อสามารักษ์ แก่เคยอาครั้ ซา
Property Lines		Vegetation removal proposed		
Ordinary high wate	er mark	Well and sanitary system		
Floodplain and wet	land boundaries	Utilities, roadways and easements		
Location and exten	nt of filling/grading	Location and type of erosion control measures		
Dimensions and lo	ocations of existing and	proposed structure		
Any other construc	tion related to your req	uest		
			imbers for all properties that	

Please list below the property owner names, addresses, and Tax Key numbers for all properties that lie within 300 feet of the boundary of the parcel where the conditional use permit is requested. Use of Marathon County GIS System will help with parcels in area and owner names.

Property Owner Name	Address	Tax Key Number	
			Property Owner:
			Address:
			City, State, Zip:
	Cells	Bu siness:	Telephone; Homes
			Emails
			Contact Person:
	ello0	7200000 B	Telephone: Hame:
			Tax Key Number:
	dimensional to	APA COLA CAUSTA	
	Telene Fernity	MU USIFA DAN FA	Zoniod District: 8 1620
Please attach a map showing	location of each property	cetition for access variance, or	Nature and disposition of any prior
	AF	FIDAVIT	
as my (our) representative (somy (our) behalf.  Further, I (we) as Owner(s) of application and all required for	) in any matter regarding this  f the property subject of this  orms and information must l	rize and direct the Authorized as application, which may includ application and Authorized Agbe complete and accurate, as don this matter can be scheduled	e the payment of filing fees on ent(s) understand that this etermined by the Zoning
			Compliance with the reigns of the Contrary to the
Signature of Property Owner	•	e public interest because	
	s sworn to and acknowledge	er notetaneV	orilleteb andig notiontanoo rioshiA
Notary signature			Attach construction plans detailing Property Lines Ordinary bigh water mark
Please return all pages along	Commission with a map of the area to: To	n Expires	show relaw digit yearbiO
Please return all pages along	Commission with a map of the area to: To	n Expiresown of Wausau Zoning Adminis	