

## How do I rezone a parcel in the Town of Lincoln?

Any time you wish to split an existing parcel into more than one parcel, a rezoning public hearing with the Plan Commission is required by State Statutes. In addition, any time you wish to receive a Conditional Use Permit for a parcel that is improperly zoned, that parcel will need to come into compliance with Town of Lincoln Zoning per State Statutes.

**Note: A rezoning hearing cannot be authorized if the applicant has any outstanding violations or obligations with the Town of Lincoln. These must be satisfied before a rezoning application can be accepted.** (see ToL ZO Section 10.1107: Delinquency)

Rezoning requests are made to the Zoning Administrator. You are required to submit the following to the Zoning Administrator to initiate a rezoning hearing (ToL ZO Section 10.1403):

1. The Rezoning Application is on page 2 of this fact sheet.
2. **A well-drawn plot plan drawn to include the following:**
  - a. a scale of one (1) inch equals 100 feet showing the area proposed to be rezoned;
  - b. its location, dimensions and acreage with an arrow pointing north;
  - c. roads labeled and/or other landmarks;
  - d. the location and classification of adjacent properties;
  - e. and the current location and use of all properties within 500 feet of the area to be rezoned.
3. The Zoning Change Fee made out to Lincoln Township.

**Once all of the above has been submitted to the Zoning Administrator, the chair of the Plan Commission will schedule the required public hearing to garner input and make a determination on the rezoning request.**

By State Statute, a rezoning request requires a Class 2 public notice. This means that the public notice must be published in a newspaper twice, one week apart. **This entire publication process takes nearly three weeks. Keep this time schedule in mind when requesting a rezoning hearing.** (ToL ZO Section 10.1405)

The applicant should attend this public hearing to answer any questions that may arise. The Plan Commission, having heard all input from the public, will make a recommendation to the Town Board of Supervisors to either grant or deny the rezoning request. The Town Board of Supervisors makes the final rezoning determination. (ToL ZO Section 10.1406) As with the Plan Commission, the applicant should attend the specified Town Board meeting to answer any questions.

Once the Town Board of Supervisors votes to either grant or deny the rezoning request, the applicant must get a certified survey of the rezoned property. **The applicant has 60 days to submit a copy of the certified survey to the Zoning Administrator.**

Rezoning Fees can be found at

<https://storage.googleapis.com/juniper-media-library/168/2025/08/Resolution%202025-1-Fee%20Schedule.pdf>

Application #: \_\_\_\_\_

**TOWN OF LINCOLN  
KEWAUNEE COUNTY WISCONSIN**

**OFFICIAL APPLICATION FOR:**

Conditional Use Permit       Zoning Change       Variance

NAME OF APPLICANT \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

SECTION # \_\_\_\_\_ LOCATION OF PROPOSED ACTIVITY \_\_\_\_\_

DESCRIPTION OF PROPOSED ACTIVITY \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**LIST ALL ADJOINING PROPERTY OWNERS WITHIN 200 FEET OF PROPOSED ACTIVITY:**

NAME 1 \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

ADDRESS 1 \_\_\_\_\_

NAME 2 \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

ADDRESS 2 \_\_\_\_\_

NAME 3 \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

ADDRESS 3 \_\_\_\_\_

NAME 4 \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

ADDRESS 4 \_\_\_\_\_

NAME 5 \_\_\_\_\_ TELEPHONE # \_\_\_\_\_

ADDRESS 5 \_\_\_\_\_

**ATTACH SITE PLAN SHOWING:**

LOCATION OF PROPOSED WORK       LOCATION OF ALL PRINCIPAL & ACCESSORY BUILDINGS  
 ALL SETBACK DISTANCES (I.E., SIDE YARD, REAR YARD, FRONT YARD)  
 LOCATION OF SEPTIC SYSTEM & WELL       LOCATION & DISTANCE FROM NEAREST LAKE OR STREAM  
 OTHER (SPECIFY) \_\_\_\_\_

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF ZONING OFFICER \_\_\_\_\_ DATE \_\_\_\_\_

DATE OF HEARING \_\_\_\_\_ FEE \$ \_\_\_\_\_

ACTION TAKEN:

APPROVAL       APPROVAL (W/ CONDITIONS) \_\_\_\_\_

DENIAL (W/ REASONS) \_\_\_\_\_

APPROVED BY:

Conditional Use Permit       Zoning Change       Variance

\_\_\_\_\_  
DATE \_\_\_\_\_

CHAIRMAN, PLAN COMMISSION

\_\_\_\_\_  
DATE \_\_\_\_\_

CHAIRMAN, TOWN BOARD