



Village Hall, 567-2757
 Fax, 567-4115
 Highway Dept., 567-2422
 Police Dept., 567-1134
 Building Inspector, 490-4141

Summit Village Hall • 37100 Delafield Road • Summit, WI 53066

Date Filed: _____

\$250.00 Application Fee Paid _____

Zoning Map Amendment Application Packet

Based on Chapter 111, Section 386 of the Village of Summit Code

Please read and complete this application carefully. All applications must be signed and dated.

1. APPLICANT OR AGENT

2. PROPERTY OWNER

Phone # (____) _____

Phone # (____) _____

e-mail _____

e-mail _____

3. Property Address and Legal Description of the Property: (May appear on the tax bill)

4. Tax Key Number: SUMT _____

5. What is the CURRENT Zoning Classification in the Village of Summit? _____

What is the PROPOSED Zoning Classification in the Village of Summit? _____

6. Identify the type of use immediately adjacent to this property.

North	South
East	West



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Rezoning Application Information

The Village of Summit has recently adopted a new Zoning and Shoreland Protection Code. Since you are contemplating a rezoning application filed under this Code, this note informs you of the information necessary for this application under Section 111-386 of the Code.

- The original petition prepared and filed in triplicate on the forms provided.
- The petition form and supplementary material must be filed with the Village Clerk.
- The petition must be accompanied by the required fee.
- All information required on the application form must be completed.
- The application packet must include three (3) copies of a plat map, drawn at a scale not less than 1" = 100'. This plat map must also include a legal description of the property proposed for rezoning on the same page as the map.
- The plat map must show a location sketch to identify the site in the Village.
- Any plat map must show the location and use of all existing buildings on the land.
- The packet must include a separate map of the property and all properties within 300 feet of such land, including the principal uses of all the property within 300 feet of the land proposed for rezoning.
- A listing of the name and mailing address of owners of all property within 300 feet of the land proposed for rezoning.

I hope that this review was helpful to you. If you have further questions, please feel free to call the Village Hall at 262-567-2757 or e-mail to admin@summitvillage.org

Sincerely,

Henry Elling
Village Planner



PROFESSIONAL SERVICES REIMBURSEMENT NOTICE

Please read *and sign* the following Notice:

Pursuant to Chapter 14-19 of the Village of Summit Code, the Summit Village Board has determined that whenever the services of the Village Planner, Village Engineer, Village Attorney, or any other Village professional staff results in a charge to the Village for that professional’s time and services, and such service is not a service supplied to the Village as a whole, the Village Clerk shall charge the fees incurred by the Village to the property owner incurring those fees (without regard to the outcome of the request). Also, pursuant to the same Chapter 14-19, certain other fees, costs, and charges are the responsibility of the property owner even if the request is not approved.

I/we, the undersigned, have been advised that, pursuant to the Village of Summit, if the Village Planner, Village Engineer, Village Attorney or any other Village professional provides services to the Village because of my/our activities, whether at my/our request or at the request of the Village, I/we shall be responsible for the fees incurred by the Village (even if my/our request is not approved). In addition, I/we have been advised that pursuant to the Village of Summit, certain other fees, costs, and charges are my/our responsibility, even if my/our request is not approved.

The undersigned will receive the first billing once charges are incurred and monthly thereafter so the undersigned remains up to date regarding any current charges.

PLEASE PRINT LEGIBLY

Information for the Owner and/or Party responsible for the Invoices:

_____ Name

_____ Phone Number

_____ Mailing Address

_____ e-mail address

Information for the Property that is the subject of the Request:

_____ Owner’s Name

_____ Property Address

Tax Key Number of the Property that is the subject of the Request: SUMT _____

Signature of the Property Owner(s) and/or Applicant(s) and Current Date:

_____ Applicant

_____ Date

_____ Owner

_____ Date

04/2018

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Village Official that accepted the form: _____ Date _____