

# Application for Conditional Use Permit

## VILLAGE OF GREENLEAF PLANNING COMMISSION

**Conditional Use Application Fee: \$ 530.00**

**Make check payable to:** *Village of Greenleaf*

**Mail to Zoning Administrator:** Shawn DeCleene; 6972 Cty Rd PP, Greenleaf, WI 54126

Please include this completed form with payment.

### APPLICANT INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

### AGENT (If Applicable)

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

### DESCRIPTION OF REQUEST

State briefly the nature of your request. Your statement should show that the proposed conditional use will conform to the standards set forth in the zoning district. Attach any plans, maps, drawings, or supporting documents.

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### PROPERTY LOCATION & DESCRIPTION

Parcel (VG \_\_\_\_\_) ¼ \_\_\_\_\_ ¼ \_\_\_\_\_ Section \_\_\_\_\_, Township \_\_\_\_\_ N, Range \_\_\_\_\_  
Legal Description of Property including number of acres.

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Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

### FOR OFFICE USE ONLY

Date of Publishing: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Planning Commission Recommendation:

Date of Recommendation: \_\_\_\_\_