



Office of the Zoning Administrator

3680 STH 60

Slinger, WI 53086

Ph. 262-677-2123

zoning@townofpolk-wi.gov

APPLICATION for CONDITIONAL USE PERMIT

*This application and its application fee are required to determine compliance with the **Zoning Ordinance**.*

*This Application **must be completed in full**. The Town of Polk **cannot accept** an incomplete Application Form or an Application Packet lacking all required information.*

Contact Information:

Property Owner: _____

Address: _____

Phone: _____ Email: _____

Applicant (if different from Property Owner): _____

Address: _____

Phone: _____ Email: _____

Property Description:

Address: _____ Parcel ID: _____

Current Zoning: _____ Lot Size: _____ Lot Width: _____

(If additional parcels, please attach as separate sheet)

Current Use of Property: _____

Conditional Use Requested:

Specify the requested Conditional Use, as provided for in Chapter 336-52.C of the Town of Polk Zoning Ordinance:

The Conditional Use is requested so that the property may be used in the following specific manner or for the following specific purposes:

Additional Comments (if any):

Additional Information:

Additional information, as applicable, shall be included as an attachment to the Application.

The purpose of the Application Checklist is to ensure a complete submittal has been prepared and to expedite the review process. The checklist is not necessarily inclusive of all requirements needed and does not absolve the Applicant from compliance with other applicable sections of the Zoning Ordinance.

NOTE: One paper copy and one digital copy (PDF or similar format) of the application packet is required.

Please complete the checklist in full by entering a ✓ or – as applicable, into each box in the Code column in the table below.

✓	Included with Application	–	Appears Inapplicable
---	---------------------------	---	----------------------

Code	Conditional Use Permit Application Submittal Requirements
	Names and addresses of the applicant, owner of the site, architect, professional engineer, contractor, and all opposite and abutting property owners of record.
	Existing and proposed structures, architectural plans, neighboring uses, parking areas, driveway locations, highway access, traffic generation and circulation, drainage, sewage and water systems, and any other matters relating to the proposed operation [Please provide this information in a Word document].

Additional plans and data may be required when determined to be necessary in order to complete a thorough and efficient review. Certain submission requirements may be waived when determined to be superfluous.

Signature and Certification:

I certify the information presented on this Application and the drawings, plans, and other materials included therein are, to the best of my knowledge, complete and in accordance with the Zoning Ordinance.

Applicant Signature: _____ Date: _____

Application Fee:

The Application Fee for a Conditional Use Permit is **\$500.00**. The Application cannot be accepted until the Application Fee has been paid.