APPLICATION FOR A CHANGE IN NONCONFORMING USE Wisconsin Dells, Wisconsin Version: May 21, 2007

General instructions . Complete this application as it applies to your project and submit one copy to the zoning administrator along with the required application fee. Before you formally submit your application and fee, you may submit one copy to the zoning administrator who will ensure it is complete. If you have any questions, don't hesitate to contact the zoning administrator at 608-253-2542. You may obtain a digital copy of this form from the zoning administrator.		- Office Use Only - Application fee Receipt number Application number	\$
1. Applicant information			
Applicant name			
Street address			
City			
State and zip code			
Daytime telephone number			
Fax number, if any			
E-mail, if any			
2. Subject property information			
Street address			
Parcel number		Note: the parcel number can be found on the tax be or may be obtained from the City.	ill for the property
Current zoning classification(s)		or may be obtained from the City.	
ciassification(s)			
Current use. Describe the current use.			
Nature of use:			
Nature of use.			
Hours of operation:			
Off-site impacts and mitigating circumstan toxic, hazardous, noxious, or other waste r	ces relating to noise, dust, air po naterials:	llution, odor, vibration, glare, heat, fire and exp	losion, and
Location of use on property:			
Other:			

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4. Proposed use. Describe the proposed use	<u>e.</u>
Nature of use:	
lours of operation:	
iours of operation.	
Off-site impacts and mitigating circumstancoxic, hazardous, noxious, or other waste m	es relating to noise, dust, air pollution, odor, vibration, glare, heat, fire and explosion, and laterials:
ocation of use on property:	
Other:	
. Other information. Provide any other info	ormation relating to the intended project and its relation to nearby properties.
	, , , , , , , , , , , , , , , , , , , ,
. Applicant certification	
♦ I certify that the application is true as of the	he date it was submitted to the City for review.
Applicant Signature	Date