



VILLAGE OF BARNEVELD

403 E. County Hwy ID, Barneveld, WI 53507

Phone: (608)924-6861 Fax: (608)924-3056

Email – Michelle@barneveldwi.gov | Brianna@barneveldwi.gov

Village Web Site – www.barneveldwi.gov

ZONING OR REZONING PERMIT APPLICATION

\$100 Filing Fee

APPLICANT INFORMATION

Applicant Name(s)

Address

City, State, Zip

Phone Number

Email

Best way to reach me is: ☐ Phone ☐ Email

PROPERTY INFORMATION

Property Address

City, State, Zip

Lot or Block Number

Subdivision

Tax Parcel Number

Total Acreage

Current Use of Property:

Proposed Use of Property:

Current Conditional Use Permit in Place: ☐ Yes ☐ No

Current Zoning: ☐ Residential ☐ Commercial ☐ Agricultural ☐ Industrial

Residential: Number of Dwelling Units _____ Number of Parking Stalls _____

Non-Residential: Number of Employees _____ Number of Parking Stalls _____ Handicapped _____

Hours of Operation _____

STATEMENT OF UNDERSTANDING

By signing below I certify that the information contained in this application is true and accurate to the best of my knowledge and understand that a deliberate misrepresentation of information may be grounds for denial or reversal of this application, and/or revocation of any approval already awarded based on this application.

I also authorize the Village of Barneveld staff permission to view and enter the subject property for the purpose of reviewing and investigating this request.

I understand that the submittal of this application and payment of the proper fees does not mean that issuance of a Conditional Use Permit is imminent and guaranteed.

I understand that issuance of a Conditional Use Permit does not qualify as, nor replace the necessity for proper permitting for the proposed project.

Applicant Signature

Date

OFFICE USE ONLY

Date Received: _____ Received By: _____

Materials Sent To:

- ☐ Zoning Administrator
- ☐ Building Inspector
- ☐ Public Works
- ☐ Police Department
- ☐ Fire Inspector
- ☐ EMS
- ☐ Lawyer (as needed)
- ☐ Engineer (as needed)

Planning Commission Meeting Date: _____

Request: ☐ Approved ☐ Denied ☐ Approved with these conditions: _____

Village Board Meeting Date: _____

Request: ☐ Approved ☐ Denied ☐ Approved with these conditions: _____