

# MISCELLANEOUS ZONING PERMIT APPLICATION

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone(s): \_\_\_\_\_

Application is for property located at:

Street Address: \_\_\_\_\_ Hillsboro, WI 54634

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I am applying for:

- |                                                          |               |
|----------------------------------------------------------|---------------|
| <input type="checkbox"/> A Zoning Change                 | Fee:<br>\$100 |
| <input type="checkbox"/> Temporary Structure Approval    | -             |
| <input type="checkbox"/> Zoning Board of Appeals Request | \$25          |
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1. For a Zoning change you must submit a survey map of the site along with a site plan showing the location, size, and shape of any proposed structures along with a description of the existing and proposed use of the lot and/or structures.

\* Please attach any supporting documents

\*\* The City of Hillsboro Plan Commission and/or Common Council may request additional information pertaining to this application as necessary for approval of this application or for enforcement of City Code.

I have read and understand the provisions of this permit application.

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

Zoning Administrator Approval: \_\_\_\_\_ Date: \_\_\_\_\_