

**ZONING TEXT CHANGE – APPLICATION FORM**

**Town of La Pointe – Town Plan Commission**

**Petition #** \_\_\_\_\_

**Date Filed** \_\_\_\_\_

**Fee** \_\_\_\_\_ **(\$1500.00 payable to the Town of La Pointe)**

**Owner(s)**

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

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

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

**Property Legal Description:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Fire Number and Road Name:** \_\_\_\_\_

**Parcel # 014-** \_\_\_\_\_ **-** \_\_\_\_\_

**Zoning District** \_\_\_\_\_

**Current use of the Property, include Improvements:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**DESCRIBE SPECIFIC CHANGES IN TEXT REQUESTED:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

**Describe your intended use of the identified property and how it corresponds to this application:**

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**I certify that the information I have provided in this application is true and accurate.**

**Signed** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Owner**

**Signed** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Owner**

*Application **NOT** valid unless signed by property owner(s)*

**Fee is to be paid when application is submitted.**

**Remit to: Town of La Pointe, PO Box 270, La Pointe, WI 54850**

For Office Use: Fee received _____ Amount _____ By _____ Date _____ TPC reviews ___/___/20___ schedules a Public Hearing on ___/___/20___ TPC deliberates issue on ___/___/20___ Recommends to the Town Board to Approve ___ Deny ___ Text Change Town Board Approves ___ Denies ___ Text Change on ___/___/20___
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