



## Winnebago County Zoning Department

The Wave of the Future

### CONDITIONAL USE APPLICATION INSTRUCTIONS

1. ***A site plan must be included with the application.*** Site plan should be drawn to scale showing exact property dimensions, setbacks (existing and proposed), building dimensions, parking areas, etc.
2. The application should include any and all pertinent information. Ex: number of employees, hours of operation, seasonal requirements, proposed landscaping, etc. Use an additional sheet of paper if necessary.
3. Application Requirements:
  - Item A:
    - A-1:** ALL property owner(s) must sign (submit original signature)
    - A-2:** If applicable, the agent must complete and sign this section.
  - Item B:
    - B-1** This information can be obtained from the tax bill, deed, or the County's GIS Mapping System.
    - B-2:** Identify the property by address, or closest address and directions (such as North of 2222 Address Road).
    - B-3:** Indicate current or proposed zoning.
    - B-4:** Check if sanitary service is existing or required and if the property will be served by municipal sewer or a private sanitary system.
  - Item C:
    - C-1** thru **C-2:** To be completed in your own words.
4. Filing:

File the completed application, site plan, and filing fee with the Zoning Office. We suggest scheduling an appointment with Zoning Staff when filing the application to confirm that all necessary information is being submitted. **Incomplete applications may be delayed until all necessary information has been submitted.**
5. **The applicant must contact the Town in which the property is located in order to be heard. Failure to contact the Town may result in the application being denied. Application fees are non-refundable.**

**IMPORTANT:** Any Conditional Use Permit granted shall expire twelve (12) months from the date of approval unless substantial work has commenced.

If you have any questions concerning the application procedure, please contact the Zoning Office Monday through Friday, 8:00 a.m. to 4:30 p.m.



**Winnebago County Zoning Department**

P.O. Box 2808  
112 Otter Ave, 3<sup>rd</sup> Floor  
Oshkosh, WI 54903-2808  
(920) 232-3344  
(920) 232-3347 (fax)

For office use only

Receipt # \_\_\_\_\_

Application #: \_\_\_\_\_

**CONDITIONAL USE APPLICATION**

**Fee: \$765.00**

(Please print or type. Please use black ink for duplicating purposes.)

**Payable to:** Winnebago County

**A. PROPERTY OWNER(S):**

A-1 NAME: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**NOTE: all property owners must sign application (husband & wife; all co-owners). Use an additional page if necessary.**

**Permission is hereby granted for appropriate County Staff to enter upon the property for the placement and removal of hearing notices and conducting inspections prior to hearing. Said permission is to remain in effect until the conclusion of the Public Hearing and is binding upon all heirs and assigns.**

Property Owners' Signature \_\_\_\_\_ Date \_\_\_\_\_

Property Owners' Signature \_\_\_\_\_ Date \_\_\_\_\_

**I HEREBY APPOINT THE FOLLOWING AS MY AGENT FOR PURPOSES OF THIS APPLICATION:**

A-2 AGENT (NAME): \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Agent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**B. PROPERTY INFORMATION:**

B-1 Tax Key/Parcel #: \_\_\_\_\_

B-2 Location of affected property: \_\_\_\_\_

B-3 Current / Proposed Zoning: \_\_\_\_\_

Zoning Code Legend			
<b>A-1</b>	Agribusiness district	<b>B-1</b>	Local Service Business district
<b>A-2</b>	General Agriculture district	<b>B-2</b>	Community Business district
<b>R-1</b>	Rural Residential district	<b>B-3</b>	General Business district
<b>R-2</b>	Suburban Residential district	<b>I-1</b>	Light Industrial district
<b>R-3</b>	Two-family Residential district	<b>I-2</b>	Heavy Industrial district
<b>R-4</b>	Multifamily Residential district	<b>M-1</b>	Mixed-Use district
<b>R-8</b>	Manufactured/Mobile Home Community district	<b>PDD</b>	Planned Development district

B-4 SEWER: Existing Required TYPE: Municipal Private System

**PROPERTY OWNER SIGNATURES**

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Name (printed): \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Name (printed): \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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