



# CALUMET COUNTY MAP AMENDMENT (REZONE)/TEXT AMENDMENT PETITION

### PART A: Property Information

Does this affect a specific property?

- Yes    No

Affected Tax Location I.D. \_\_\_\_\_

Town of: \_\_\_\_\_

If a map amendment request, is it requested the entire parcel be rezoned?

- Yes    No    NA

*(If only a portion of the property is to be rezoned it is necessary a legal description of the area to be rezoned be submitted with this petition.)*

Current zoning district: \_\_\_\_\_

Lot size (ac./sq. ft.): \_\_\_\_\_

*Attach a copy of the survey, if available*

### PART B: Petition

If a map amendment request, proposed zoning district: \_\_\_\_\_

If a text amendment, what code is it proposed be amended, and what section number:

Code: \_\_\_\_\_

Section: \_\_\_\_\_

Specific language to be changed (attach a separate sheet of paper or copy of the code with appropriate section *underlined*, if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed new language (attach a separate sheet of paper, if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Explain why this petition is being submitted:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*(Note: If this petition is to rezone land zoned Exclusive Agricultural or Wetland a separate sheet of paper shall accompany this petition explaining compliance with 82-118(c) or (d) of Ch. 82.)*

### PART C: Petitioner Information

Petitioner name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_

E-mail address: \_\_\_\_\_

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

### PART D: Authorization/Certification

(I) (We) hereby petition the Calumet County Board of Supervisors for an amendment (map or text) to the code specified on this petition in the manner proposed on this petition. (I) (We) understand a public hearing is required before the Calumet County Planning, Zoning and Farmland Preservation Committee prior to the Board of Supervisors taking formal action on this petition. If the Committee recommends denial, (I) (We) understand this petition will *not* go to the Board of Supervisors for action.

If this is a petition to rezone land currently zoned Exclusive Agricultural, (I) (We) understand a map amendment *can not* be authorized unless said proposal meets *all* the rezoning criteria specified in both the code and Chapter 91 of the Wis. Stats. Furthermore, (I) (We) understand an Exclusive Agricultural rezoning can not be finalized until a conversion fee has been paid in accordance with the code and Chapter 91 of the Wis. Stats. Said fee per Ch. 91, Wis. Stats., plus 15%.

(I) (We) hereby authorize staff and/or members of the Committee or Board of Supervisors to inspect the property identified on this petition, if applicable.

(I) (We) understand this petition will not be scheduled for a public hearing until the required non-refundable petition fee of \$ \_\_\_\_\_ has been paid (check payable to Calumet County).

(I) (We) hereby certify the information on this petition is correct to the best of (my) (our) knowledge and belief.

Owner(s) Signature(s): \_\_\_\_\_

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

**PLEASE KEEP A COPY OF THIS APPLICATION FOR YOUR RECORDS!**

Office use only: Fee Rcvd. \_\_\_\_\_ Rcpt. No. \_\_\_\_\_

Public hearing date: \_\_\_\_\_

Board of Supervisors decision date: \_\_\_\_\_

If a denied rezoning request, report date: \_\_\_\_\_