

TOWN OF SOMERSET

ST. CROIX COUNTY, WISCONSIN

748 Hwy. 35, P.O. Box 248
Somerset, WI 54025
715.247.3470
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Application for Rezoning, Conditional Use Permit and Design Waivers

Property Location: _____ ¼, _____ ¼, Sec. _____, T _____, R _____

Property Owner: _____
Mailing Address: _____
Email Address: _____
Daytime Phone: (____) _____

Surveyor: _____
Mailing Address: _____
Email Address: _____
Daytime Phone: (____) _____

I, certify by my signature that all information presented herein as well as supporting information are true and correct to the best of my knowledge. I further agree to withdraw this written application if substantive false or incorrect information has been included. I hereby request the Town of Somerset to process this application.

Signature: _____ Date: _____
 Owner Authorized Agent

Rezoning, Conditional Use Permit and Design Waiver Submittal:

Submittal deadline for a Rezoning, Conditional Use Permit (CUP) or Design Waiver submittal is 14 days prior to the Plan Commission meeting. The commission may recommend approval, conditional approval, table or denial of the request to the Town Board. All revisions must be addressed and resubmitted in final form to the Town Board. The Town Board will approve, conditional approve, table or deny the conditional use permit (CUP) or variance (CSM).

Materials to submit should include:

- 14 complete sets of plans which include map of parcel and surrounding parcels
- List of adjacent landowner's names and addresses and proof of adjacent landowner notification by USPS
- Applicable fees
- Reason for request and any hardships or special considerations regarding property involved
- Review Town of Somerset Comprehensive Land Use Land for rezoning requests

Fee: \$ 100.00 - Attorney and Engineer fees that are directly related to this project will be billed separately as they occur to the developer/land owner.

An application must be filed with St. Croix County Community Development for their consideration.

TOWN USE ONLY: Application accepted: _____ Received by: _____
Fees paid: _____ Date paid: _____

9/09/2015