

**PETITION FOR  
ZONING CHANGE/AMENDMENT**

TO: Town of Oshkosh Board

Mailing: Town Clerk  
c/c Zoning Administrator  
Town of Oshkosh  
1076 Cozy Lane  
Oshkosh, WI 54901

The undersigned owner(s) of the property herein described petitions your honorable body for an amendment to the Town of Oshkosh Zoning Ordinance and Map to effect a change in the Zoning Classification of real estate in the Town of Oshkosh, Winnebago County, Wisconsin, more particularly described in summary as follows, to-wit:

From/existing \_\_\_\_\_ zoning district to \_\_\_\_\_ zoning district

Location of property by address: \_\_\_\_\_

Parcel number: \_\_\_\_\_

Optional reference Certified Survey Map Number \_\_\_\_\_

The land described above will be used for: \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

Respectfully submitted:

\_\_\_\_\_  
(Name printed) Property Owner  or Applicant/other than property owner

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip)

\_\_\_\_\_  
(Legal Signature)

**Town of Oshkosh**  
Zoning Change/Amendment Application

**Fee: \$450.00**

Receipt # \_\_\_\_\_ ID Number \_\_\_\_\_

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

**PROPERTY OWNER:**

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

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

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**APPLICANT INFORMATION** (If different than owner):

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

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

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Permission is hereby granted for appropriate Town Staff to enter upon the property for the placement and removal of hearing notice sign, and conducting inspections prior to hearing. Said permission is to remain in force until the conclusion of the Public Hearing and is binding upon all heirs and assigns.

I ACCEPT THESE TERMS AND HEREBY SUBMIT THE APPLICATION TO PROCEED IN THE ZONING AMENDMENT PROCESS:

Signature of Property Owner or Applicant with the permission of the property owner.

Signature: X \_\_\_\_\_ Date: \_\_\_\_\_

**A. PROPERTY INFORMATION:**

1) Tax Key/Parcel #: \_\_\_\_\_

2) Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ or CSM# \_\_\_\_\_

Section \_\_\_\_\_ Town \_\_\_\_\_ North \_\_\_\_\_ Range \_\_\_\_\_ East Acres \_\_\_\_\_

3) Location/Address of Property: \_\_\_\_\_

4) **Zoning (Existing):** \_\_\_\_\_ **Zoning Proposed:** \_\_\_\_\_

**Use (If Existing):** \_\_\_\_\_ **Use (Proposed):** \_\_\_\_\_

5) Existing Sewer: Septic Mound Holding Tank Municipal or Needed \_\_\_\_\_

6) Proposed site plan included with application: answer yes or no, \_\_\_\_\_

**C.) REASONS FOR CHANGE:**

**Describe the MAIN USE:**

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**Describe the PROPOSED USE:**

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**Describe the essential services (sewer, water, streets, etc.) for present and future uses:**

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**Describe why the proposed use would be the highest and best for the property:**

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**Describe the property use compatibility with surrounding land use:**

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**A Public Hearing will be set upon the receipt of this application and payment, whereas the applicant will furnish necessary information to the authorized Town Official for processing of this application.**

**The property owner and applicant will be notified of the public hearing date, along with property owners within a distance surrounding the location applied for.**

Date Application Received by Town Official: \_\_\_\_\_

Authorized Town Official signature: \_\_\_\_\_

Title of Town Official: \_\_\_\_\_