

WAUKESHA COUNTY DEPARTMENT OF PARKS AND LAND USE  
PLANNING AND ZONING DIVISION  
515 West Moreland Blvd. Room AC 230  
WAUKESHA, WISCONSIN 53188  
(262) 548-7790  
Website: [www.waukeshacounty.gov](http://www.waukeshacounty.gov)

**PETITION TO AMEND THE MAP OF THE COUNTY ZONING CODE and/or  
COUNTY SHORELAND AND FLOODLAND PROTECTION ORDINANCE**

Fee Pd. \_\_\_\_\_ Receipt No. \_\_\_\_\_ Received by \_\_\_\_\_ Petition No. \_\_\_\_\_  
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HONORABLE TOWN BOARD OF SUPERVISORS  
TOWN/CITY/VILLAGE OF \_\_\_\_\_ WAUKESHA COUNTY, WISCONSIN

I/We, the undersigned, owner of the property described below, located in the Town/City/Village of \_\_\_\_\_ do hereby petition to amend the MAP of the County Zoning Code and/or the County Shoreland and Floodland Protection Ordinance in the following manner:

Present Zoning Classification(s): \_\_\_\_\_

Proposed Zoning Classification(s): \_\_\_\_\_

Present Use(s) of the subject property: \_\_\_\_\_

Proposed Use(s) of the subject property: \_\_\_\_\_

Tax Key No(s). \_\_\_\_\_

Legal Description of the subject property: \_\_\_\_\_  
\_\_\_\_\_

Reasons/Conditions which justify a change in the zoning (attach additional pages, if necessary):  
\_\_\_\_\_  
\_\_\_\_\_

Owner: \_\_\_\_\_ Agent: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Daytime Phone No.(\_\_\_\_\_) \_\_\_\_\_ Daytime Phone No.(\_\_\_\_\_) \_\_\_\_\_

Email address and/or fax number if you would like a copy of the staff report forwarded to you prior to the (County Park and Planning Commission) meeting: \_\_\_\_\_  
\_\_\_\_\_

The following information must be submitted with this application:

1. Three (3) copies of an accurate site plan/map or plat of survey (preferred) drawn **to scale**, showing the location of the proposed zoning district boundaries, the location and use of the buildings on the subject property, and the use of all properties within 300 feet of the subject property.
2. A filing fee payable to the Waukesha County Department of Parks and Land Use (inquire as to the current fee amount).

Note: Review of this application may include a site inspection.

The undersigned owner hereby certifies that all of the above statements, information and attachments contained herein are true and accurate to the best of his or her knowledge and belief.

Signature of Agent \_\_\_\_\_ Date of Filing \_\_\_\_\_

Signature of Owner \_\_\_\_\_ Date of Filing \_\_\_\_\_