

Village of Cottage Grove

APPLICATION FOR AMENDMENT OF OFFICIAL ZONING MAP

Owner (must be the applicant): _____

Parcel Address _____ Parcel Number _____

Owner Address _____

Owner Email _____ Owner Phone: _____

Current Zoning Classification _____

Requested Zoning Classification: _____

The following items must be submitted with each application. Prior to submitting the final application, it is recommended that the applicant submit 2 draft copies of the application and map(s) for review by the Zoning Administrator 10 days before the application deadline.

- (1) Plot Plan drawn to scale of one inch equals one-hundred feet (1"=100'), showing area proposed to be rezoned, its location, its dimensions, the location and classification of adjacent zoning districts, and the location and existing use of all properties within tow hundred (200) feet of the area proposed to be rezoned
(2) Written justification of the requested zoning with reasons why the Applicant believes the proposed zoning is appropriate and specify proposed use
(3) Owner's Names and Addresses of all properties lying within two-hundred (200) feet of the area proposed to be rezoned
(4) Additional Information required by the Plan Commission or Village Board
(5) Payment of the petition fee to the Village Treasurer equal to the amount specified in the Zoning Ordinance.

Verification by applicant: I, _____, owner for which the Amendment of Official Zoning Map is sought, certify that the application and the above information is truthful and accurate to the best of my ability.

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Consideration for Approval: Granted____ Granted with Conditions____ Denied____
Planning Commission Recommendation: _____ Date: _____
Village Board Recommendation: _____ Date: _____