



Village of North Freedom
105 N Maple St – PO Box 300
North Freedom, WI 53951
608-522-4550 | Fax: 608-522-4574
clerk_treasurer@vonf.wi.gov

CONDITIONAL USE PERMIT APPLICATION

**If any information is omitted or falsified, this will cause this application to be automatically denied by the Village of North Freedom Planning & Zoning Commission *
Village of North Freedom Ordinance Chapter 16 – Section 4 Conditional Uses*

YOUR NAME/ADDRESS

Name: _____ Email Address: _____

Address: _____ Phone Number: _____

Mailing Address: _____ City/State/Zip: _____

LANDOWNER INFORMATION

****If Different than Above****

Name: _____ Email Address: _____

Address: _____ Phone Number: _____

Mailing Address: _____ City/State/Zip: _____

ANY PROFESSIONAL SERVICES INFORMATION

Architect:

Engineering Company:

OPPOSITE & ABUTTING PROPERTIES

****Any Information for Neighboring Properties****

Please use the back of the page if more pages are needed.

Complete Address: _____

Present Use of Property: _____

Complete Address: _____

Present Use of Property: _____

Complete Address: _____

Present Use of Property: _____

Complete Address: _____

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Complete Address: _____

Present Use of Property: _____

Complete Address: _____

Present Use of Property: _____

Complete Address: _____

Present Use of Property: _____

Complete Address: _____

Present Use of Property: _____

Complete Address: _____

Present Use of Property: _____

Complete Address: _____

Present Use of Property: _____

Complete Address: _____

Present Use of Property: _____

CERTIFICATION & PERMISSION

Certification: I hereby certify that I am the owner or authorized representative of the owner of the property which is the subject of this Permit Application. I certify that the information contained in this form and attachments is true and accurate. I certify that the project will be in compliance with all permit conditions. I understand that failure to comply with any or all of the provisions of the permit may result in permit revocation and a fine and/or forfeiture under the provisions of applicable laws.

Permission: I hereby give the City permission to enter and inspect the property at reasonable times, to evaluate this notice and application, and to determine compliance with any resulting permit coverage.

SIGNATURE: _____

DATE: _____

NOTICE OF WI PUBLIC RECORDS LAW

Please be advised that under Wisconsin's Public Records Law, WI Stats. 19.31, et al, the complaint and supporting evidence will be available for public review upon request. Only in an exceptional case may access be denied.

TO BE COMPLETED BY VILLAGE STAFF:

DATE RECEIVED: _____

DATE REVIEWED BY PLAN COMMISSION: _____

DATE APPROVED BY PLAN COMMISSION: _____

CONDITIONAL USE PERMIT NUMBER: _____