

# Village of Oostburg Zoning Application



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

Type of Permit:

- Zoning Variance     
  Conditional Use Permit     
  Land Use Permit     
  Rezoning Request

OWNER	AGENT FOR THE OWNER
Name: _____	Name: _____
Mailing Address: _____	Mailing Address: _____
City, State, Zip: _____	City, State, Zip: _____
Phone: (    ) _____	Phone: (    ) _____
Email: _____	Fax: (    ) _____
	Email: _____

Address of property involved  
if different than owner's address: \_\_\_\_\_

**Describe the Land / Structures Involved:** *(use extra paper as needed)*

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**Describe the Proposed Use for the Land / Structures:** *(use extra paper as needed)*

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**Describe the Variance Requested (Variance Request Only):** *(use extra paper as needed)*

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**Describe the Justification for the Changes Requested:** *(use extra paper as needed)*

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**Current Zoning District:** *(Circle One)*

R-1    R-1A    R-2    R-3    R-4    B-1    B-2    LIB    BIP    I    IPF    RD

**Proposed Change to Zoning District (Rezoning Request Only):** *(Circle One)*

R-1    R-1A    R-2    R-3    R-4    B-1    B-2    LIB    BIP    I    IPF    RD

**The Following Must Accompany this Completed Application:**

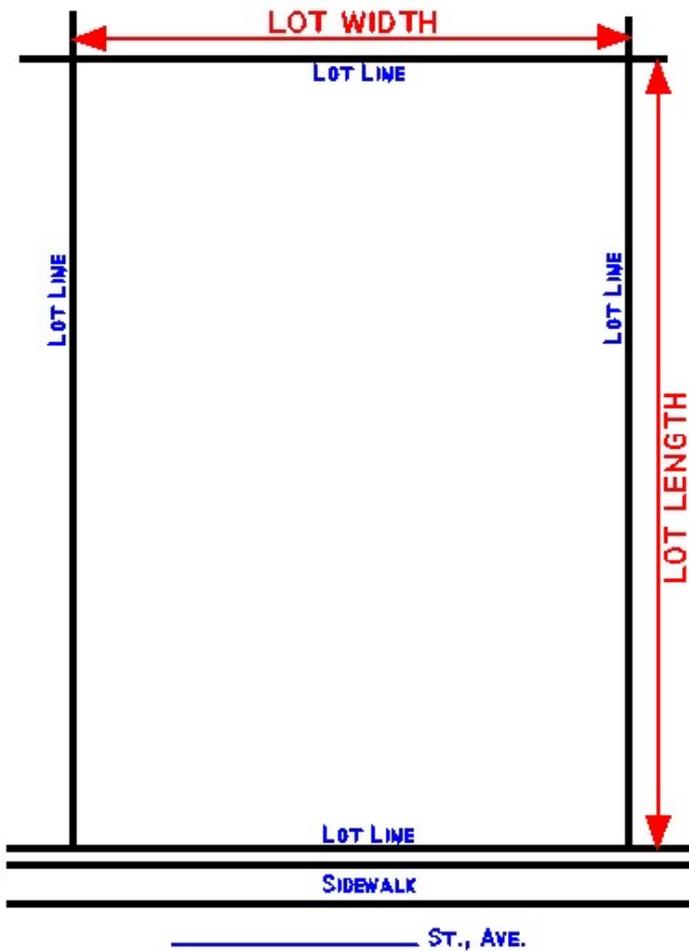
1. A Check or Money Order made out to the Village of Oostburg for \$350.00 (*non-refundable application fee*)
2. Complete the map below or provide a plot plan drawn to the scale of 1 inch = 100 feet of the area under consideration.
3. The names and addresses of all property owners lying within 200 feet of the property under consideration.

Signed: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Owner

Agent for the Owner



Use the map to the left to draw the buildings (include any proposed changes) on your lot, providing dimensions from the buildings to the lot lines. Letter each dimension and fill it in below on the corresponding letter.

Lot Width: \_\_\_\_\_

Lot Length: \_\_\_\_\_

- A: \_\_\_\_\_
- B: \_\_\_\_\_
- C: \_\_\_\_\_
- D: \_\_\_\_\_
- E: \_\_\_\_\_
- F: \_\_\_\_\_
- G: \_\_\_\_\_
- H: \_\_\_\_\_
- I: \_\_\_\_\_
- J: \_\_\_\_\_

**For Office Use Only**

Tax Key Number:

Approved

Denied

Zoning District:

Ref. in Minutes: Vol.: Pg.:

Permit Printed:

Permit Number:

Permit Billed:

Invoice Number: