

# Calumet County Zoning Map Amendment Application



206 Court Street  
Chilton, WI 53014  
Phone: (920) 849-1442  
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[www.calumetcounty.org](http://www.calumetcounty.org)

THIS AREA FOR OFFICE USE ONLY	
Application Number:	
Fee:	Receipt Number:
Date Received:	

OWNER INFORMATION	AGENT INFORMATION
Owner Name:	Agent Name:
Mailing Address:	Mailing Address:
City, State Zip Code:	City, State Zip Code:
Phone:	Phone:
Email:	Email:

Property Information							
Location ID(s) #:	1/4	1/4	S	T	N	R	E
Town of:	Parcel Size (acre):						
Physical Address:	Zoning District:						

Project Information	
<p style="text-align: center;"><b>Reason for Change:</b></p> <p style="text-align: center;">New Home:      Farm Consolidation:      Other:</p>	<p style="text-align: center;"><b>FOR AMENDMENTS IN THE EXCLUSIVE AGRICULTURAL DISTRICT</b></p> <p style="text-align: center;"><b>Ratio: Brillion, Charlestown 1:20 / Woodville 1:40</b></p>
	Total farm area (acres):                  acres
	Zoning to EA-P District :                  acres
	Zoning to AR District :                  acres

**Applicant Accountability Agreement**

I hereby authorize members of the Calumet County Planning, Zoning and Land Information Department or members of the Calumet County Planning, Zoning and Farmland Preservation Committee to enter the affected property, provided at a reasonable time and an attempt is made to inform the occupant, for purposes of obtaining information pertinent to my application request. I understand this petition will not be scheduled for a public hearing until the required non-refundable fee of \$450.00 has been paid (check payable to Calumet County). I, the undersigned, hereby apply for a Zoning Map Amendment and certify that all the information on the application and attached is true and correct to the best of my knowledge.

Owner or Agent Signature: _____	Date:
Owner or Agent Signature: _____	Date:
Owner or Agent Signature: _____	Date:
Owner or Agent Signature: _____	Date:

Staff Notes: This Area For Office Use Only