CITY OF GALESVILLE

PETITION FOR ZONING MAP AMENDMENT

(Application Fee: \$125.00)

To the City Council of Galesville, WI:

The undersigned hereby petition the City Council to amend the Zoning Ordinance as follows:

PROPERTY LOCAT	ΓΙΟΝ A	ND DESCRIPTION:		
Legal Description of Property:				
Address:				
CHANGE REQUES	TED:			
Present Zoning District:			To Proposed District:	
PROPERTY OWNE	RSHIP:			
Owner:			Agent:	
Address:			Address:	
Phone:			Phone:	
ATTACHMENTS:	1)	Names and addresses of all property owners abutting and opposing Parcel to be changed (within 100')		
	2)	Plot Plan: showing the area involved, it's location, dimensions, And location of adjacent structures (within 100')		
	3)	More information may be requested through the City Planning Commission if deemed necessary to properly evaluate this requested zoning change.		
Note: If you have que	estions, p	lease contact the Zoning	Administrator.	
Respectfully submitted:		Date:		
Date Filed:		Fee Paid:	Hearing Date:	
Dates Notice Published:		Date Notices Mailed:		
Action Taken: Date Approved:			Denied for Following Reasons:	