

TOWN OF WRIGHTSTOWN - ZONING AMENDMENT REQUEST
(Planning Commission or Designated Agent)

Zoning Amendment Requests are \$450 plus \$25 per lot. Please make check payable to **Town of Wrightstown**. Complete form and mail to Rick Gerbers, Zoning Administrator, 6816 Shanty Road, Greenleaf WI 54126.

Fee \$ _____ Ck# _____ Date Rec'd _____ Request No _____

LAND OWNER: _____ AGENT (If any): _____

Name _____

Address _____

Phone: _____

REQUESTED CHANGE: (State briefly what is being requested and why)

PROPERTY LOCATION AND DESCRIPTION

W- _____ 1/4, _____ 1/4, SEC _____, T _____ N, _____ R _____ E

Area: _____ Acres(s) Briefly describe location of property in Town
(Road name, landmarks, neighbors, etc.) _____

If you believe a simple drawing would assist the Planning Commission, please attach such a drawing.

I hereby certify that:

_____ I am the owner of parcel W-

_____ I am acting as the agent for the owner of parcel W- _____ in accordance with the provisions of the Town of Wrightstown Zoning Administration.

Land Owner

Agent