



Columbia County Plan Amendment Application

Phone: (608) 742-9660
Fax: (608) 742-9817
www.co.columbia.wi.us

Planning & Zoning Department

112 E. Edgewater St.
Portage, WI 53901

\$260.00
Scheduled Meeting

\$510.00
Special Meeting

Make checks payable to "Columbia County Treasurer". We do not issue refunds. Credit Cards accepted.

A Comprehensive Plan Amendment is a requested change or revision to the text or maps of the adopted Columbia County Comprehensive Plan for a specific property or properties. Comprehensive Plan Amendments are considered by the Planning and Zoning Committee twice annually at the regularly scheduled May and November Committee meetings. Special meeting dates at other times can be scheduled for an increased fee.

1. Amendment Type:

- Amend the Future Land Use designation for a parcel of land, or portion thereof, as depicted on the Future Land Use Map? (*Continue to Question 2*)
- Amend the text or another part of the plan? (*Continue to Question 3*)

2. Proposed Change to the Future Land Use Designation:

Parcel Number(s): _____

Current Land Use Designation: _____

Describe the current use of each parcel:

Proposed Land Use Designation:

3. Proposed Change to the Text or Another Part of the Plan:

Describe the proposed change. Indicate if the proposal would add to or delete from the Plan and include the page numbers where the change is being proposed to occur:

4. Reason for Proposed Amendment:

Why do you believe this amendment should be made?

5. Other Information:

Please provide any other pertinent information you feel will assist County staff, the Planning & Zoning Committee and the County Board during the review process of this application:

6. Applicant Certification:

I certify that the above information is true, accurate and complete.

Applicant Signature _____ **Date** _____

Print Name _____

7. Owner Certification:

I certify that the above information is true, accurate and complete.

Property Owner Signature _____ **Date** _____

Print Name _____



Columbia County General Information

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The owner hereby authorizes access to the property described herein, by authorized representatives of the Planning & Zoning Department, for the purpose of gathering or verifying information relating to the application, and for verifying compliance with any approval or permit that may be granted. The applicant further agrees that the site is staked and an inspection of such proposed structure may be made by the Columbia County Planning & Zoning Department between the hours of 8:00 am and 4:30 pm, Monday through Friday.

Pursuant to §59.691(3) Stats, the applicant must sign below to indicate acknowledgement of the following, "You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes and streams". Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Dept. of Natural Resources web page at: <http://dnr.wi.gov/wetlands/programs.html> or contact a Dept. of Natural Resources service center.

The undersigned hereby applies for a permit to do work herein described. The undersigned agrees that all work will be done in accordance with the Columbia County Zoning, Floodplain and Shoreland-Wetland Protection Ordinances, and with all laws of the State of Wisconsin, applicable to said premises.

1. Contact Information

Property Owner Information

Property Owner Name: _____

Mailing Address: _____

City, State, Zip: _____

Telephone: _____

E-Mail Address: _____

Applicant/Contractor Information (if different than Property Owner)

Applicant Name: _____

Mailing Address: _____

City, State, Zip: _____

Telephone: _____

E-Mail Address: _____

2. Property Description (parcel information can be obtained at www.co.columbia.wi.us)

Site Address: _____

Town of _____

Section _____ Town _____ N Range _____ E

Subdivision _____ CSM _____ Lot _____

Parcel # _____ Acreage _____

Mail Permit(s) to: Owner Applicant/Contractor or Pick Up Permit(s): Owner Applicant/Contractor

Property Owner Signature _____ Date _____

----- Shaded Area For County Use Only -----

Existing Zoning: _____ Permit(s): _____ STAMP

Wetland Status: _____

Flood Plain Status: _____ Permit #(s): _____

Septic Permit #: _____ Evaluation? Yes No _____

Driveway Permit #: _____ Town Permit: _____ Amount Paid: _____

NOTES:

Department Signature _____ Date: _____