

## Plan Amendment Application

Planning & Zoning Department

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

112 E. Edgewater St. Portage, WI 53901

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	\$510.00 Plan Amendment Application Fee						
	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.						
	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)						
	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:							
	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:						
	molade the page hambers where the change is being proposed to cood.						
	Reason for Proposed Amendment:						
	Why do you believe this amendment should be made?						

	Print Name					
	Property Owner Sig	nature	Date			
		I certify that the above information is true, accurate a	and complete.			
7.	Owner Certification:					
	Print Name					
	Applicant Signature		Date			
		I certify that the above information is true, accurate a	and complete.			
6.	Applicant Certification:					
	•	her pertinent information you feel will assis d the County Board during the review proc				
5.	Other Information:					

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1.	Property Owner Informa								
	Property Owner Name:								
	Mailing Address:								
	City, State, Zip:								
	Telephone:								
	E-Mail Address:								
	Applicant/Contractor Inf	formation (if dif	fferent than Prope	rty Owner)					
	Applicant Name:								
	Mailing Address:								
	City, State, Zip:								
	Telephone:								
	E-Mail Address:								
2.		E-Mail Address:							
	Site Address:								
	Town of								
	Section								
	Subdivision		_						
	Parcel #								
Mail Permit(s) to: Owner Applicant/Contractor or Pick Up Permit(s): Owner Applicant/Contractor  A permit issued by the Planning & Zoning Department is issued reflective of the information and statements provided by the applicant. The provision of false, misleading, or fraudulent statements may cause a permit to be later revoked. With this understanding, I certify that all information provided in support of my application is true, accurate, and complete to the best of my knowledge.									
Pro	operty Owner Signature_				Date				
			- Shaded Area Fo	County Use Only					
Exi	sting Zoning:			Permit # (s):		STAMP			
We	etland Status:								
Flo	od Plain Status:								
Sep	ptic Permit #:	_ Evaluation?	Yes No						
	veway Permit #: TES:	Town Permit:		Amount Paid:\$					
Department Signature				Date:					

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A permit issued by the Planning and Zoning Department may not encompass all matters necessary to be permitted in regards to the project. It is the applicant's sole responsibility to comply with applicable law and to review whether a permit(s) from any other Federal, State, County, Town (or other Municipality), or other applicable regulatory agency may be required. In addition, all applicants should contact their Town governments to review whether any additional building or UDC permits are required.

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.

Applicant agrees to and assumes all responsibility for the matter contemplated by the Application. Such includes, but is not limited to, those factual, alleged or otherwise asserted by any party, legal, monetary, or other considerations applicable to the performance, quality, sustainability or permanence, liability, timeliness, and/or legal compliance of the matter describe within the Application.

Pursuant to §59.691(3) Stats, the applicant must sign this application 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.

Zoning Permits issued by the Planning & Zoning Department must be posted in a prominent place on the premises prior to, and during the period of construction, alteration or movement.

A permit issued by the Planning & Zoning Department is issued reflective of the information and statements provided by the applicant. The provision of false, misleading, or fraudulent statements may cause a permit to be later revoked. With this understanding, I certify that all information provided in support of my application is true, accurate, and complete to the best of my knowledge.