



Columbia County  
**Rezoning Application**  
*Amendments to the Official Zoning Map*

**Planning & Zoning Department**  
 Pursuant to Columbia County Ordinance 12.150.06

Please do not staple checks to this form.

Phone: (608) 742-9660  
[www.co.columbia.wi.us](http://www.co.columbia.wi.us)

112 E. Edgewater St.  
 Portage, WI 53901

When turning in this portion of the Rezoning Application, to be added to the next available Agenda (depending on where you fall on the Schedule), verify the following are on file in the Department:

- Petition
- Preliminary Certified Survey Map of Proposed Rezone Area (if property is not vacant, the location of all the buildings must be included)
- Legal Description of Area to be Rezoned (Metes and Bounds Description)
- Proof of Existing Approved Driveway/Copy of Driveway Access Permit
- \$500.00 Petition Fee
- Town Action Report or Minutes

**1. Contact Information**

**Property Owner Information**

Property Owner Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**2. Property Description** (parcel information can be obtained at [www.co.columbia.wi.us](http://www.co.columbia.wi.us))

Site Address: \_\_\_\_\_

Town of \_\_\_\_\_

Section \_\_\_\_\_ Town \_\_\_\_\_ N Range \_\_\_\_\_ E

Subdivision \_\_\_\_\_ CSM \_\_\_\_\_ Lot \_\_\_\_\_

Parcel # \_\_\_\_\_ Acreage \_\_\_\_\_

**3. Surveyor Information**

Company: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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

STAMP

Amount Paid: \_\_\_\_\_





Columbia County  
**Petition for Rezoning**  
*Amendments to the Official Zoning Map*

**Planning & Zoning Department**  
Pursuant to Columbia County Ordinance 12.150.06(2)

Phone: (608) 742-9660  
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Portage, WI 53901

TO THE HONORABLE BOARD OF SUPERVISORS OF COLUMBIA COUNTY

I, \_\_\_\_\_, do hereby petition your  
honorable body to rezone from \_\_\_\_\_ to  
\_\_\_\_\_ the following described property located  
in the Town of \_\_\_\_\_, Columbia County, Wisconsin.

Tax Parcel No. \_\_\_\_\_ Sec. \_\_\_\_\_, T \_\_\_\_\_ N, R \_\_\_\_\_ E

Description:

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
(Signature of Property Owner)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(City, State and Zip Code)

Received the above rezoning request on: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_  
(Signature of Person Receiving Petition)

