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City of Ashland, Department of Planning & Development, 601 W Main Street, Ashland, WI 54806

CONDITIONAL USE PERMIT REQUEST APPLICATION

Property Address:

Parcel # 201-

Zoning District:

Applicant:

E-mail/Mailing Address of Applicant:

Phone Number (daytime):

This Request is for the Following Use:

A Conditional Use is development that would not generally be appropriate within a district but might be allowed in certain locations within the district if specific requirements are met. Before a Conditional Use Permit may be issued, the use must first go through a Public Hearing process, and gain approval from both the Plan Commission and the Common Council. Special requirements may be placed on the use during this approval process.

Signature of Applicant:

Date:

Signature of Property Owner (if different):

Date:

Proposed conditional use must meet the requirements of the Unified Development Ordinance (No. 781). Per Wisconsin's Open Meeting Law, comments on this permit application, either by the applicant or concerned citizen, shall be raised in person at the scheduled meeting or brought up to City Staff (through conversation, written letter or email) for review at the scheduled meeting. Due to Wisconsin's Open Meeting Law, Plan Commissioners and Councilors are unable to discuss this matter privately. Thank you.

Application Checklist:

- Overview/ Cover Letter Describing the following:
 - ▶ Detailed Description of Proposed Use Including compadibility with nearby uses, importance of services to the community, and neighborhood protections
- Site Plan (if applicable)
- \$200 Permit Application Fee (Payable to the City of Ashland)

If incomplete, no further processing of the application will occur until the deficiencies are corrected.

For Office Use:

Approved Approval Date: _____ Paid Valid through: _____

Conditions (if applicable):
