CITY OF BURLINGTON

Administration Department
300 N. Pine Street, Burlington, WI, 53105
(262) 342-1161 – (262) 763-3474 fax
www.burlington-wi.gov

RACINE COUNTY MULTI-JURISDICTIONAL COMPREHENSIVE PLAN AMENDMENT APPLICATION FOR CITY OF BURLINGTON

Date of Application for Plan Amendment: _____

Attach a legal description and provide the tax key numbers of parcels included in the application:

_____

_____

Property Owner's Name:

_____ _____

Signature

Mailing Address: _____

Phone Number: _____

Note: if the property owner's signature cannot be obtained in the above space, a "letter of agent status" signed by the property owner must be submitted if you are an applicant (tenant, leaseholder, or authorized agent representing the legal owner) acting on their behalf.

Applicant's Name (if different than property owner):

_____ _____

Signature

Mailing Address: _____

Phone Number: _____

Current Zoning: _____

Existing planned land use category as shown on the land use plan map:

_____

Proposed land use category:

_____

Reason(s) for proposed Amendment: (Describe the intended use of the property)

FOR OFFICE USE ONLY: ***Resolution No.*** _____ ***Ordinance No.*** _____

Fee Paid: ☐ $200 Date pd:_____

Date to Council: _____ Approved by Council: ☐ Yes ☐ No Date Approved by Council:_____