



115 W. Pleasant St.  
Portage, WI 53901  
608-742-2176

## City of Portage Land Use Application

- All Land Use Applications should be filed at City Hall, 115 W. Pleasant St.
- The following information is required for all applications to be reviewed.
- This form may also be completed online at: [www.portagewi.gov](http://www.portagewi.gov), click on "Public Works: Forms & Applications" in the Quick Links Box.

### FOR OFFICE USE ONLY:

RECEIPT NO: _____	AMT PAID: _____	DATE REC'D: _____
PARCEL NO: _____	PROPERTY ADDRESS: _____	ZONING: _____
REVIEW REQUIRED BY: <input type="checkbox"/> PLAN COMMISSION <input type="checkbox"/> COMMON COUNCIL		
<input type="checkbox"/> BOARD OF ZONING APPEALS <input type="checkbox"/> ZONING ADMINISTRATOR		
STATEMENT OF JUSTIFICATION <input type="checkbox"/> YES <input type="checkbox"/> NO	PRECONFERENCE MEETING _____	PUBLIC HEARING(S) _____

### Application Type (complete detailed section on reverse side)

<input type="checkbox"/> Conditional Use Permit \$150 + \$30 Rec. Fee	<input type="checkbox"/> Zoning Amendment \$150
<input type="checkbox"/> Temporary Use Permit \$150	<input type="checkbox"/> Zoning Variance \$150

### APPLICANT/CONTACT INFORMATION

APPLICANT INFORMATION		CONTACT INFORMATION ( <input type="checkbox"/> SAME AS APPLICANT)	
Applicant Name:		Contact Name:	
Address:		Address:	
City, State, Zip		City, State, Zip	
Telephone:		Telephone:	
Fax:		Fax:	
Email:		Email:	
		Relationship to Applicant:	

### OWNERSHIP INFORMATION

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PROPERTY OWNER – 1 ( <input type="checkbox"/> SAME AS APPLICANT)		PROPERTY OWNER – 2 (IF NEEDED)	
Owner's Name:		Owner's Name:	
Address:		Address:	
City, State, Zip		City, State, Zip	
Telephone:		Telephone:	
Fax:		Fax:	
Email:		Email:	

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

<b>CONDITIONAL USE PERMIT</b> (Reviewed by Plan Commission)		<input type="checkbox"/> SITE PLAN ATTACHED
Current Use of Property and Type of Business (if applicable): _____		
Proposed Use of Property and Type of Business (if applicable): _____		
Proposed Hours of Operation: _____	No. of Employees: _____	No. of Parking Stalls: _____
Daily No. Customers/Visitors _____	Weekly Truck Traffic: _____	Outside Storage? <input type="checkbox"/> Yes <input type="checkbox"/> No
		Outside Machinery/Mechanicals? <input type="checkbox"/> Yes <input type="checkbox"/> No
Exceeds 40,000 sq. ft.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, constitutes a large or group development. See Questionnaire.		
FOR OFFICE USE:	PUBLIC HEARING NOTICE TO ALL WITHIN 300 FT PUBLISH PUBLIC HEARING NOTICE TWICE, ONE WEEK APART, AT LEAST 10 DAYS PRIOR TO PUBLIC HEARING RECORD AT COUNTY	MAILING DATE: _____

<b>TEMPORARY USE PERMIT</b> (Reviewed by Zoning Administrator)		<input type="checkbox"/> SITE PLAN ATTACHED
Current Use of Property and Type of Business (if applicable): _____		
Proposed Use of Property and Type of Business (if applicable): _____		
Dates of Temporary Use: Start Date: _____ End Date: _____		
Proposed Hours of Operation: _____	No. of Employees: _____	No. of Parking Stalls: _____
Daily No. Customers/Visitors _____	Weekly Truck Traffic: _____	Outside Storage? <input type="checkbox"/> Yes <input type="checkbox"/> No
		Outside Machinery/Mechanicals? <input type="checkbox"/> Yes <input type="checkbox"/> No
FOR OFFICE USE:	NO PUBLIC HEARING REQUIRED IF OVER 6 MONTHS, RECORD AT COUNTY	

<b>ZONING AMENDMENT</b> (Reviewed by Plan Commission & Common Council)		<input type="checkbox"/> SITE PLAN/MAP ATTACHED	<input type="checkbox"/> STATEMENT OF JUSTIFICATION ATTACHED
Proposed Use of Property: _____			
Proposed Hours of Operation: _____	No. of Employees: _____	No. of Parking Stalls: _____	
Property contains wetlands and/or floodplain? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, explain: _____			
Overlay District? <input type="checkbox"/> Yes <input type="checkbox"/> No	If zoning is changed, do you need a Conditional Use Permit for the proposed use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
FOR OFFICE USE:	PUBLIC HEARING NOTICE TO ALL WITHIN 300 FT PUBLISH PUBLIC HEARING NOTICE TWICE, ONE WEEK APART, AT LEAST 10 DAYS PRIOR TO PUBLIC HEARING RECORD AT COUNTY	MAILING DATE: _____	

<b>VARIANCE</b> (Reviewed by Board of Zoning Appeals)		<input type="checkbox"/> SITE PLAN ATTACHED	<input type="checkbox"/> STATEMENT OF JUSTIFICATION ATTACHED
FOR OFFICE USE:	PUBLIC HEARING NOTICE TO ALL WITHIN 100 FT PUBLISH PUBLIC HEARING NOTICE 10 DAYS BEFORE BOARD OF ZONING APPEALS MEETING	MAILING DATE: _____	