## **FPZ** Conditional Use Permit Application

For the siting of a single family residence in zoning districts A-1 and A-2

Town of Sherman	Meeting Date & Time:							
Sheboygan County	Fee Required: \$250							
PO Box 88	Pay	ment Rec'd Date:						
Adell, WI 53001	,	Receipt #:						
, me, 3000_								
Property Owner & Property Information								
Property Owner Name	Phone							
Address	City	State	Zip Code					
Property Address	Parcel # 59028							
Property's Current Zoning	Property's Current Acreage							
This application shall contain or have attached thereto the following information:								
A color aerial photo, no more than two years old, and of sufficient size and resolution to determine								
whether lands have been under agricultural u								
how the proposed residence will not do any o	- · · · · · · · · · · · · · · · · · · ·		<b>.</b>					
Convert prime farmland from agri-	•	land previously u	sed as cropland,					
other than a woodlot, from agricu			•					
location or size for a residential lo								
→ Significantly impair or limit the cu		iral use of other r	protected					
farmland.	Helli Of Tuture apricant	irai use oi ou.e. <sub>r</sub>	NOIECICA					
The names and addresses of the owners of al	II opposite and abutting	lands as they app	near on the current					
records of the Sheboygan County Register of			ocar on and ourse					
			n or Town Board.					
Any additional information that may be subsequently required by the Plan Commission or Town Board, including but not limited to the Development Guidelines listed in Section 5.4 and the Site Plan items listed								
-			Olle Flair items nateu					
in Section 5.5, shall be obtained by the applicant and attached to the application.								
Applicant & F	Property Owner Signatu	res						
Applicant Name								
Applicant Signature			Date					
Check here if Applicant and Property Owner are the same, otherwise complete the following:								
Property Owner Name								
Property Owner Signature			Date					

FOR TOWN USE ONLY							
Date App Rec'd:	PC Mtg Date:		PC recommend to TB?	YES	NO		
Date notice sent to Sounder:	of:						
Public Hearing Date:			TB approve?	YES	NO		