

**City of Oconto
Plan Commission
Application for Conditional Use Permit**

IN ORDER TO AVOID ANY DELAYS, PLEASE COMPLETE THE FOLLOWING INFORMATION. IF ALL OF THE INFORMATION IS NOT COMPLETED, THE APPLICATION WILL NOT BE PROCESSED.

Petitioner Application

Name: _____

Address: _____

City: _____ State & Zip: _____

Phone #: _____

Property Information

Parcel No. _____

Legal Description (as listed on the tax bill) _____

Physical address of property: _____

Current Zoning of the property: _____

Permit Information

Please describe the proposed use in detail _____

Conditional Use Requested: _____

The application fee of \$125.00 must be included with this application for processing. (Checks are to be made payable to the City of Oconto)

Applicant Signature: _____ Date: _____

Agent Signature: _____ Date: _____

Attachment: Conditional Uses – City of Oconto Ordinance