



11011 BRIGHAM AVENUE / P.O. BOX 189  
BLUE MOUNDS, WI 53517-0189  
TELEPHONE (608) 437-5197  
WEB PAGE [www.bluemoundsvillage.com](http://www.bluemoundsvillage.com)

**ZONING CHANGE REQUEST APPLICATION**

I, the undersigned, being the owner of the area herein described, hereby apply to the Plan Commission and Village Board of the Village of Blue Mounds, Wisconsin, to rezone the following described property from:

\_\_\_\_\_ to \_\_\_\_\_

All that part of the \_\_\_\_\_ of the \_\_\_\_\_, Section \_\_\_\_\_, T \_\_\_\_\_, R \_\_\_\_\_, Village of Blue Mounds, Dane County, Wisconsin, described as follows:  
Lot \_\_\_\_\_ of Block \_\_\_\_\_ of the \_\_\_\_\_ Addition; or outlet \_\_\_\_\_.

The following comments may assist the Village Board, Plan Commission, and others, in reviewing the application: (Proposed Use and Reason for change)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If necessary, continue on attached page

Please find the following items attached to this application:

- ◆ **Certified Survey** of the property attached.
- ◆ **Owners names and addresses** of all properties within two-hundred (200) feet of the subject area.
- ◆ **Additional Information** required by the Village President, Board of Trustees, or Plan Commission.
- ◆ **A fee receipt** from the Village Treasurer in the amount of one hundred (\$100.00) dollars.
- ◆

I hereby certify that all the above statements and attachments as submitted herewith are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Owner, Agent or Attorney

Date Filed \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Address

\_\_\_\_\_  
Village Clerk

\_\_\_\_\_  
Telephone Number