

**CONDITIONAL USE REQUEST TO
THE TOWN OF WRIGHTSTOWN PLANNING
COMMISSION**

APPLICANT

AGENT FOR APPLICANT

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

STATE BRIEFLY THE NATURE OF YOUR REQUEST. SAID STATEMENT SHOULD SHOW THAT THE PROPOSED CONDITIONAL USE WILL CONFORM TO THE STANDARDS SET FORTH IN THE ZONE DISTRICT. YOU SHOULD ALSO ATTACH SUCH PLANS AND/OR OTHER DATA ELABORATING UPON YOUR REQUEST.

PROPERTY LOCATION AND DESCRIPTION

W- _____, _____ 1/4, _____ 1/4, SEC _____, T _____ N, R _____ E

Town of Wrightstown

Area: _____ Acres(s)

Date: _____

Signature of Applicant

Return with a detailed site plan and a check to the Town of Wrightstown for \$300 by the 22nd of the month to Richard Gerbers 6816 Shanty Rd. Greenleaf, WI 54126 and a hearing will be scheduled.