



TOWN of TROY

654 Glover Road, Hudson, WI 54016

Phone: (715) 425-2665 Fax: (715) 425-2551

Office Hours: Monday - Thursday 9:00 – 12:30

TOWN LAND USE APPLICATION FORM

THIS COMPLETED APPLICATION FORM, ALL REQUIRED PAPERWORK AND FEES MUST BE RECEIVED BY THE TOWN CLERK, TOWN ENGINEER AND TOWN ATTORNEY BY noon ON THE FIRST OF THE MONTH (one month prior to the Plan Commission meeting at which the application will be heard).

The Plan Commission routinely meets on the 1st Thursday of every month.

Name _____

Address _____

Phone # _____ email address _____

LOCATION OF PROPERTY (Street Address & Parcel Identification Number) _____

REQUEST FOR: (Circle one) C.S.M., Rezoning, Exception to Design Standards, Concept Review, Preliminary Plat, and Final Plat, Town recommendation on County Special Exception/Variance request.

Describe what you are proposing to do (be specific): _____

Reason for exception or variance request (cite specific County Ordinance Section on which request is based):

(ATTACH EXTRA SHEETS AS NECESSARY)

All landowners, developers or agents of, shall **pay professional review fees equal to the actual cost to the town** for fees and disbursements incurred by it for professional review of any farm plan, concept plan, preliminary plat, final plat, certified survey map or separate application to transfer development rights. "Professional review" is the independent review of such plans or proposals on behalf of the town, including, planners, engineers, surveyors, attorneys and any other professional employees or consultants consulted by the town. Please refer to the Town Code, Chapter 135 -Subdivision of Land: Article IV (Recovery of Town Costs).

FOR TOWN USE ONLY:

Date Recd. _____

Notices Sent _____

Complete _____

Applicant's Signature