

TOWN OF TILDEN VARIANCE REQUEST

A VARIANCE IS HEREBY REQUESTED FROM CHAPTER:

_____ 16 PLOT PLAN OR _____ 23 SIGNS

SECTION _____ OF THE TILDEN CODE OF ORDINANCES.

1) APPLICANT _____

ADDRESS _____

PHONE NUMBER _____ CELL _____

2) PROPERTY OWNER, IF DIFFERENT
NAME _____

ADDRESS _____

PHONE NUMBER _____ CELL _____

3) PROPERTY DESCRIPTION: _____ 1/4 _____ 1/4 SECTION _____ TOWN 29 N, RANGE
_____ W TOWN OF TILDEN

4) PROPERTY ADDRESS _____

5) PARCEL NUMBER: 22909- _____ - _____

PARCEL SIZE _____

CERTIFIED SURVEY MAP NO. _____ VOLUME _____

PAGE _____ SUBDIVISION _____

6) PRESENT USE _____

7) PRESENT IMPROVEMENTS _____

8) PROPOSED IMPROVEMENT REQUIRING A VARIANCE:

A VARIANCE MAY BE GRANTED IF ALL THE FOLLOWING CONDITIONS ARE MET:

1. Neighboring properties will not be adversely affected.
2. The variance will not be contrary to the public interest as expressed by the purpose and intent of the ordinances.
 - PLEASE EXPLAIN YOUR APPLICATION AND THE REASONS FOR APPLYING, ADDRESSING THE ABOVE CONDITIONS. USE ADDITIONAL PAGES IF NEEDED.
 - INCLUDE PLOT PLAN/LAYOUT/BLEUPRINT OF INTENDED USE.
 - NONREFUNDABLE HEARING FEE OF \$100.00 MUST ACCOMPANY PETITION. SUBMIT PETITION AND FEE TO: TOWN OF TILDEN, 12193 120th AVENUE, CHIPPEWA FALLS, WI 54729

PETITIONER UNDERSTANDS that notice of request will be sent to: all town officials and adjacent property owners.

ALSO, AS A PETITIONER, I UNDERSTAND that I must contact other governmental agencies, if needed (COUNTY and/or STATE).

I UNDERSTAND that I must also attend the public hearing and the Town Board meeting or send an agent to represent me.

_____ Date _____
(Signature of petitioner or agent)

(Address if different from above)
