

Planning and Parks Department

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#2 - APPLICATION FOR AMENDMENT TO THE MULTI-JURISDICTIONAL COMPREHENSIVE PLAN FOR WASHINGTON COUNTY: 2050

CONCURRENT REVIEW OF LAND USE MAP AMENDMENT DUE TO SUBDIVISION PLAT REQUEST AND PRELIMINARY PLAT REVIEW PROCESS

Proposed A	Amendment #			
Receipt #_				
Please	be very specific in your answers; type or print clearly	. Review the enti	re applicat	ion.
1. Applica	ant/owner requesting comprehensive plan amendment	due to land divis	ion:	
a)	Name of Applicant			
b)	Home/Business Address/Phone of Applicant			
c)	Name of Owner(s) of property (if different from above)			
d)	Owner(s) mailing address(es)			
e)	House No. or Fire No. Address(es) of property involved House No. or Fire No.			Zip ——— Zip
f)	Tax Parcel Number(s)			
	City/Village/Town adopted this amendment by ordinardinance approving the plan amendment.)	ance? (Please attac	ch a copy o	f the
	(over)			

3.	3. Information on property(ies) involved:						
Lo	t		Block	Subc	division or C	CSM #	
Lo	catio	on	1/4,	1/4,	Section		, Municipality
Pa	rcel	size:	sq. ft. o	or	acres		
Cu	ırren	t County	y Land Use Map	Designati	on		
Pro	opos	ed Coun	nty Land Use M	ap Designa	tion		
Da	ite of	f any pre	evious public he	arings con	cerning this	proper	rty
4.		Explain		sed amendı			with the goals, objectives, policies and e Plan for Washington County: 2050:
5.	ele	ctronica	ally to <u>Deb.Siel</u> s	ski@washo	cowisco.gov	<u>v</u>)	a: (Submit 3 hardcopies to office or f the property to be redesignated, drawn to
	a)				,	,	i the property to be redesignated, drawn to
		b.		and, floodp	plain areas, 1	rivers,	se(s) streams, lakes, forested areas ed Natural Resource Areas
	b)	Full leg	gal description o	f property(ies):		
	c)	A copy	of the local ord	inance app	roving the p	olan am	nendment in the local comprehensive plan
	d)	Paymer	nt of \$350 fee fo	or amendme	ent process ((Fees n	may change annually.)
Mo	ore i	nformati	ion may be requ	ested by th	e Washingto	on Cou	unty Planning and Parks Department if

deemed necessary to properly evaluate your request.

6. Please note:

- a. Either the applicant or applicant's representative must be present at the Land Use and Planning Committee meeting to answer additional questions.
- b. Applicants will be notified of public hearing and meeting date.
- c. Contact the Planning and Parks Department about zoning and/or sanitary permits which may be required.
- d. Incomplete applications will not be accepted.
- e. All legal descriptions, plans, and supporting information must be submitted with the application. It is important to check the application form and information check list for the type of information that may need to be included with the application.
- f. Please be aware that there is a separate plat review process and fee required as outlined in the Washington County Code of Ordinances, Chapter 257- Land Divisions.
- g. Please be aware that Comprehensive Plan Amendment Applications may take up to 4 months to process and receive County Board approval.

I certify that the foregoing statements and information on attached maps, plans and other exhibits are true and correct to the best of my knowledge.

I understand that there is no guarantee of approval of the Comprehensive Plan amendment request or approval of the land division - preliminary plat review request. I understand that there is risk involved in requesting a concurrent review of the Comprehensive Plan amendment request and land division - preliminary plat review request. By starting the land division - preliminary plat review process without having the Comprehensive Plan amendment request adopted by the County Board, I understand that I shall not receive a refund for the land division - preliminary plat review fee if the Comprehensive Plan amendment request is denied by the Planning, Conservation and Parks Committee or County Board.

Signature of applicant	Date	

Submit this form at the Washington County Planning and Parks Department

Washington County Planning and Parks Department 333 East Washington Street Suite 2300 P. O. Box 2003 West Bend, WI 53095–2003

Phone: (262) 335-4445

DEPARTMENT USE ONLY Individual Reviewing Application________ Date_______ Fees Paid \$_______ Date Paid______ Received By:________ Comments:

Rev: 11/3/2020