



# Zoning Code Amendment City of Washburn

Version: May 25, 2017

WASHBURN CITY HALL  
119 Washington Avenue  
Washburn, WI 54891

**Overview:** The Common Council adopted the City's zoning code, which consists of text and a zoning map. Both of these can be amended using this application form.

**Governing regulations:** The procedures and standards governing the review of this application are found in Article 7 of the City's zoning code.

**General instructions:** Complete this application and submit one copy to the City Clerk at the mailing address shown above. Before you formally submit your application, you may meet with the City Administrator who can answer any questions you may have. You may also ask the City Administrator to review your application before it is formally submitted to determine if it is complete and provides enough information to describe the circumstances related to this application. If you have any questions, do not hesitate to contact the City Administrator at (715) 373-6160 ext 4 or via e-mail at [washburnadmin@cityofwashburn.org](mailto:washburnadmin@cityofwashburn.org).

### Office Use Only

Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_ Fee Paid: \_\_\_\_\_

**1. Applicant and agent information** Include the names of the agent, if any, that helped prepare this application including the supplemental information. Examples include surveyors, engineers, landscape architects, architects, planners, and attorneys.

|                       | <u>Applicant</u> | <u>Agent</u> |
|-----------------------|------------------|--------------|
| Name                  | _____            | _____        |
| Street address        | _____            | _____        |
| City, state, zip code | _____            | _____        |
| Daytime telephone     | _____            | _____        |
| E-mail address        | _____            | _____        |

**2. Type of proposed amendment (check one or both)**

- Map amendment Complete Part A and C
- Text amendment Complete Part B and C

### Part A. Questions Related to Map Amendment

**3. Subject property information**

Physical address \_\_\_\_\_

Tax key number(s) \_\_\_\_\_

Note: The tax key number can be found on the tax bill for the property or it may be obtained from the City Clerk.

Is the subject property currently in violation of the City's Zoning Code as determined by the zoning administrator?

- No
- Yes

If yes, please explain.

Comment: Pursuant to Section 6-10 of the City's zoning code, the City may not issue a permit or other approval that would benefit a parcel of land that is in violation of the zoning code, except to correct the violation or as may be required by state law.

Are there any unpaid taxes, assessments, or other required payment that are specifically related to the subject property?

- No
- Yes

If yes, please explain.

Comment: Pursuant to Section 6-11 of the City's zoning code, the City may not issue a permit or other approval that would benefit a parcel of land where taxes, assessments, or other required payments are delinquent and due.

**4. Zoning information**

The subject property is located in the following zoning district(s). (check all that apply)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> R-1 Rural residential      | <input type="checkbox"/> C-1 Cottage commercial  | <input type="checkbox"/> MUW Mixed-use waterfront |
| <input type="checkbox"/> R-2 Suburban residential   | <input type="checkbox"/> C-2 General commercial  | <input type="checkbox"/> L-1 Lakefront            |
| <input type="checkbox"/> R-6 Mixed residential      | <input type="checkbox"/> C-3 Downtown commercial | <input type="checkbox"/> M Marina                 |
| <input type="checkbox"/> R-7 Waterfront residential |  | <input type="checkbox"/> I Industrial             |

Proposed zoning classification(s)

\_\_\_\_\_

Comment: If the proposed amendment includes more than one parcel of land or if the parcel is to have more than one zoning classification, attach a map (8½ x 11) that shows the location of the proposed zoning classifications.

**5. Proposed map amendment.** Select the general reason(s) why you believe the zoning classification should be changed and provide additional details.

- The zoning designation should be brought into conformity with the City's comprehensive plan.

- A mapping error was made on the official zoning map.

- Other

**6. Consistency with zoning requirements**

Are there any buildings on the subject property?

- No
- Yes

If yes, please describe each and state whether it is consistent with the proposed zoning classification.

|    |
|----|
| 1. |
| 2. |
| 3. |
| 4. |

Are there any existing land uses on the subject property?

- No – Land is vacant / undeveloped
- Yes

If yes, please describe each, including conditional uses, and state whether it is consistent with the proposed zoning classification.

|    |
|----|
| 1. |
| 2. |
| 3. |
| 4. |
| 5. |
| 6. |

Does the size of the subject property comply with the minimum lot size of the proposed zoning district?

- No
- Yes

If no, describe why you believe the map amendment should be made in spite of this.

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Has the City approved a variance or special exception for the subject property?

- No
- Yes

If yes, provide the year of issuance and a short description of each one.

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|----|
| 1. |
| 2. |
| 3. |
| 4. |

**Part B. Questions Related to Text Amendment**

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**7. Proposed text amendment.** For each proposed text amendment, identify the section number (e.g., 7-444) to be revised and describe the proposed change and the reason(s) why you believe the change should be made.

| Section number | Proposed change | Justification |
|----------------|-----------------|---------------|
| 1.             |                 |               |
| 2.             |                 |               |
| 3.             |                 |               |
| 4.             |                 |               |

**Part C.**

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**8. Attachments.** List any attachments included with your application.

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**9. Other information.** You may provide any other information you feel is relevant to the review of your application.

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**10. Applicant certification**

- I certify that all of the information in this application, along with any attachments, are true and correct to the best of my knowledge and belief.
- I understand that submission of this application authorizes city officials, Plan Commission members, Common Council members, employees, and other designated agents to enter the subject property to conduct whatever site investigations are necessary to review this application. This does not authorize any such individual to enter any building on the subject property, unless such inspection is specifically related to the review of this application and the property owner gives his or her permission to do so.
- I understand that this application and any written materials relating to this application will become a permanent public record and that by submitting this application I acknowledge that I have no right to confidentiality. Any person has the right to obtain copies of such written materials or view it online.
- I understand that the zoning administrator will review this application to determine if it contains all of the required information. If he or she determines that the application is incomplete, it will not be scheduled for review until it is deemed to be complete.
- I certify that I am the person identified below OR I am submitting this application on behalf the entity identified below.
  - property owner
  
  - Plan Commission
  - Common Council

Applicant:

Date:

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