

**TOWN OF TRENTON
APPLICATION FOR CONDITIONAL USE PERMIT (CUP)**

TO: Town Board, Town of Trenton, Washington County, WI

DATE: _____

The undersigned hereby applies for a Conditional User Permit to be issued in accordance with Town Ordinance Chapter 380 Zoning, Article IV Conditional Uses

Name _____

Address _____

Legal Description (use one) Lot _____ of Block _____ of _____ Subdivision

Certified Survey Map No. _____ in Section _____

Attached metes and bounds description

Tax Key Number T11- _____

Zoning District _____

1. Specific conditional use requested provided for in Zoning Ordinance § _____:

2. The property is presently used for the following purpose(s):

3. The Conditional Use Permit is requested so that the property may be used in the following specific manner or for the following purpose(s):

4. Attached is a plat of survey or location sketch drawn to scale which shows:

- The boundaries and dimensions of the property
- The location of existing and proposed buildings and their distances from lot lines
- The location of driveways and easements
- The distances to neighboring buildings and their uses
- The location of the well and septic system and their distances to lot lines and buildings
- Such other information as requested by the Town Administrator/Zoning Administrator

5. Attached or listed on back is a list of names and addresses of the owners of all property within 200 feet of the property described above

Dated: _____

Owner

Owner

