CONDITIONAL USE PERMIT APPLICATION

Fee Required: \$ 300

Town of Lyndon, Sheboygan County W6081 CTH N, Plymouth, WI 53073 p - 920-528-7255

- → Contact Permit Agent Al Steiner at 920-838-3249
- → Complete all sections of this form and return to Clerk's office or Permit Agent with fee and other required documents (see section below).

NAME	(- /-	PHONE	
MAILING ADDRESS			CITY	ZIP
SITE ADDRESS			CITY	ZIP
PARCEL#			CURRENT ZONING	•
Describe the existing	g use of the real estate inv	olved:		
Describe the reason	for this application:			
_	REQUIRED DO	OCUMENTS FOR TH	HIS APPLICATION	
is attached.	Site map of parcel including system and well. List of Owner names and m Any additional information recommendation and/or demonstrated the above petition to the system.	ailing addresses with that may be require ecision.	nin five hundred (500 d by Permit Agent, P lity, and that the req	n) feet of this parcel. C or TB to assist in the
Petitioner Signature			Date	
		For Town Use Onl	у	
Date App Rec'd:	PC Mtg Date:		PC recommend to TB?	Yes No
Date notice sent to Review:		For Publication Date	es of:	
Pub Hearing Date:			TB Approve? Yes	No
Plan Commission Reco	ommended Conditions:	Town Boar	d Approved Conditio	ns: