

**TOWN OF MARSHFIELD
SPECIAL USE PERMIT APPLICATION**

Name of Applicant _____

Applicant's Address _____

Applicant's Phone No _____

Applicant's E- Mail _____

Owner of Property _____

Owner's Phone No _____

Architect/Engineer/Contactor's Name _____

Architect/Engineer/Contactor's Phone No _____

Architect/Engineer/Contactor's E-Mail _____

Tax Parcel No. _____ Fire No. _____

Legal description of property (on tax statement) _____

Lot area & dimensions _____

Existing Zoning District _____

Existing Land Use & Improvements _____

Nature and disposition of any prior petition for appeal, variance or special use

Description of all nonconforming structures & uses on this property _____

Special Use Requested (Ordinance section number & specific use)

Justification for special use requested:

Design/practices proposed to achieve standards

Names & Addresses of All Adjoining Property Owners within 500 ft

Attach a map or sketch of your site and detailed construction plans.

Submission of a Special Use Permit Request will need to include a development plan which will include the following information:

- North arrows, date of preparation, and scale on 8½" x 11" size paper**
- Name(s) of all adjacent or surrounding streets and right-of-way width(s)**
- Recorded property lines and their dimensions**
- All existing and proposed buildings and structures accessory to the principal use, including the use of each building or structure, dimensions and their locations on the parcel**
- Dimensions of existing and proposed yard setbacks for buildings and structures**
- Dimensions of existing and proposed parking, loading, and unloading areas, and size of existing and proposed driveways**
- The location of proposed and existing signage**
- The location and type of all proposed and existing exterior lighting fixtures**
- The location, height and materials of all proposed and existing fences or retaining walls**

Submit preliminary architectural plans for the existing and proposed buildings that show sufficient detail to permit an understanding of the style of the development and the design of the building(s)
Stormwater and erosion control plan
Other additional information that may be deemed appropriate by the Zoning Administrator.

The decision of the Plan Commission is advisory only. The Town Board has the final decision.

I hereby certify that all the above statements and attachments submitted hereto are true and correct to the best of my knowledge.

Signature _____ **Date** _____

Signature _____ **Date** _____

Application fee is \$225.00. Make checks payable to Town of Marshfield. Submit fee and original application plus ten (10) copies to:

**Town of Marshfield Clerk
P O Box 94
Mt. Calvary, WI 53057-0094**

SUPA 2013

Office Use: Date Rec'd _____ **Amt Pd** _____

Accepted by: _____