

**TOWN OF BRIGHAM
ZONING CHANGE APPLICATION**

Property Owner _____

Mailing Address _____

Email _____

Telephone Numbers _____

Applicants/Agent _____

Mailing Address _____

Email _____

Telephone Numbers _____

This is an application seeking approval for the following:

_____ Rezone From _____ to _____

_____ Conditional Use Permit for _____

Parcel Size (Acres) _____ Township Section _____

I understand that I will be charged per Ordinance 1.01 Fee Schedule. Fees apply to site visits for driveways, building sites, field road accesses, Plan Commission meetings, County Zoning meetings, driveway inspections, special meetings, engineer fees, lawyer fees, soil scientists and any other costs incurred as a result of this request. Fees are due following decision at the Town Board and before application will be transferred to Iowa County. I understand that fees left unpaid will be assessed to the Property Owner on the following year's tax bill.

Property Owner

Signed: _____ Date: _____

Applicant/Agent

Signed: _____ Date: _____

The Brigham Plan Commission requires the following items (unless exempted) be provided to the Brigham Town Clerk at least fourteen (14) days before the scheduled meeting. Some items are to be shown at the site during the site visit.

_____ County preliminary development review response (From County Development Office)

_____ Map/aerial photo showing existing property, house, driveway and septic locations

_____ Parcel of record information, including past land divisions (if applicable)

The Brigham Plan Commission will do a site visit to observe the parcel. They may photograph the parcel. They will then return to the Barneveld-Brigham Municipal Building to discuss the proposal. The Town or their representative will revisit the site as necessary.

First Site Visit _____ Signed _____

Second Site Visit _____ Signed _____

Approved/Denied (circle one) by Plan Commission _____ Date _____

Request for additional information _____ Date _____

Comments regarding action _____

Action Taken By Town Board:

Approved/Denied (circle one) by Town Board _____ Date _____

Sent back to Plan Commission _____ Date _____

Request for Additional Information _____ Date _____

(Use this section for additional descriptions, explanations or maps)