

Appeal to the Washburn County Zoning Committee

Date of application _____ Fee \$ 625.00 _____ Application # _____

Property owner _____ Phone # (____) _____

Address _____

Property description _____ 1/4 _____ 1/4 _____ 1/4, Section _____, Twsp. _____ R. _____

Town of _____ Property fire # _____

Lot _____ Block _____ Subdivision or CSM _____

Map # _____ Record ID # _____

Lot size _____ Acreage _____ Zoning district _____

What decision/ordinance are you appealing? _____

Reasons (you may use additional sheets) _____

Ordinance Interpretation _____

(Applicant or representative signature)

(Date signed)

(Mailing address if different than above)

Date/s published _____ Hearing date _____

Decision of Zoning Committee – Washburn County, WI

Findings of Fact

Having heard the testimony and considered the evidence presented, the Committee finds the application to be **(Correct / Incorrect)**.

Conclusion of Law

Based on the above finding of fact, the Committee concludes that:

Order and Determination

On the basis of the above findings of fact, conclusion of law, and the record in this matter, the Committee orders:

The zoning administrator is directed to issue a zoning permit incorporating these conditions.

Any privilege granted by this decision must be exercised within _____ months of the date of this decision by obtaining the necessary building, zoning, and other permits for the proposed construction. This period will be extended if this decision is stayed by the order of any court or operation of law.

This order may be revoked by the Committee after notice and opportunity to be heard for violation of any of the conditions imposed.

Zoning Committee, Chair

Date

This decision may be appealed by filing an appeal with the Washburn County Board of Adjustments within 30 days after the date of filing of the decision.