

**OUTAGAMIE COUNTY
APPLICATION FOR AIRPORT ZONING PERMIT
OFFICE USE ONLY**

FILE NO. _____

Date Filed _____

Fee Paid _____

Town of _____

Tax Parcel # _____

Applicant or Agent _____

(Please print name clearly)

Address _____ Telephone _____

(city, state and zip code)

Owner of Property _____

Address _____ Telephone _____

Contractor _____

Address _____ Telephone _____

Legal Description of Property _____

Lot Size _____ Underlying Zoning District _____

Airport Overlay Zoning District _____

Present Use _____

Proposed Use _____

This request for an Airport Zoning Permit is made under the terms of the Outagamie Airport Zoning Ordinance, Section 21.53(4)(b).

Please attach the following:

1. A plot plan, drawn to scale, showing the area involved, its location, dimensions and location of any structures (existing and proposed) on the property.
2. A statement addressing any conditions set forth by the Zoning Ordinance.

CERTIFICATION

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

Signature of Applicant _____ Date _____

Zoning Administrator Approval

I hereby approve this Airport Zoning Permit based on the above stated information and the requirements of the Airport Zoning Ordinance.

Signature of Administrator _____ Date _____

Submit five (5) copies of the attachments.

Submit to: Zoning Department * 410 S. Walnut Street * Appleton, WI 54911