

TOWN OF _____
OUTAGAMIE COUNTY

I hereby certify that the Town Board of _____, at a legally convened Meeting of the Town Board held on the _____ day of _____, 20____, voted to **approve** or **deny** (please circle one) the following request:

- () Rezoning Request
- () Special Exception
- () Conditional Use
- () Variance
- () Appeal
- () Other

Petitioner: _____

File Number: _____

Dated

Town Clerk

Return to: ZONING ADMINISTRATION
3RD FLOOR OUTAGAMIE CO ADMINISTRATION BLDG
410 S WALNUT ST
APPLETON WI 54911

Retain a copy for Town's file.

Note: This form must accompany your application and must be filled out by the Town, and signed.