

CITY of BELOIT

Planning & Building Services Division

100 State Street, Beloit, WI 53511 Phone: (608) 364-6700 Fax: (608) 364-6609

PUD - Master Land Use Plan Application

(Please Type or Print)

File Number: _____

1. Address of subject property: _____

2. Legal description: _____

If necessary attach a copy of the complete legal description.

3. Area of parcel in square feet or acres: _____

4. Tax Parcel Number(s): _____

5. Owner of record: _____ Phone: _____

(Address)

(City)

(State)

(Zip)

6. Applicant's Name: _____

(Address)

(City)

(State)

(Zip)

(Office Phone #)

(Cell Phone #)

(E-mail Address)

7. All existing use(s) on this property are: _____

8. The applicant requests review and approval of a **PLANNED UNIT DEVELOPMENT / Master Land Use Plan**: in a(n) _____ **Zoning District.**

9. A Preapplication Conference was held on: _____.

10. All the proposed use(s) for this property will be:

Principal use(s): _____

Secondary use(s): _____

11. State how the proposed development differs from the type of development that would be permitted under the existing zoning regulations. _____

12. Describe how the proposed development provides greater benefits to the City of Beloit than an otherwise permitted development. _____

13. Project timetable: Start date: _____ Completion date: _____

14. I/We) represent that I/we have a vested interest in this property in the following manner:

- () Owner
- () Leasehold, length of lease: _____
- () Contractual, nature of contract: _____
- () Other, explain: _____

The applicant’s signature below indicates the information contained in this application and on all accompanying documents is true and correct.

I/We, the undersigned, do hereby respectfully make application for and petition the City Plan Commission and City Council to grant the requested action for the purpose stated herein. I/We represent that the granting of the proposed request will not violate any of the required standards of the Zoning Ordinance of the City of Beloit. I/We also agree to abide by all applicable federal, state and local laws, ordinances, rules, and regulations.

_____/_____/_____
(Signature of Owner) (Print name) (Date)

_____/_____/_____
(Signature of Applicant, if different) (Print name) (Date)

In order for your request to be heard and considered in a timely manner, you must submit the completed application and all accompanying documents to the Planning and Building Services Division for acceptance by the filing deadline date prior to a scheduled Plan Commission meeting. This application must be submitted with one copy of a scaled drawing showing the layout of the proposed development in accordance with all code requirements, and the application fee.

To be completed by Planning Staff

Filing fee: **\$500.00** Amount paid: _____ Meeting date: _____

Application accepted by: _____ Date: _____