



410 Division Street
 P.O. Box 146
 Park Falls, WI 54552
 Phone (715) 762-2436 • Fax (715)762-2437
www.cityofparkfalls.com

PETITION FOR:

- () Minor Subdivision - \$200 filing fee
- () Zoning Change - \$200 filing fee
- () Appeal from Zoning Ordinance - \$200 filing fee
- () Conditional Use Request - \$200 filing fee
- () Appeal from Subdivision Requirements - \$200 filing fee

This Petition is for: _____

Reason for Petition: _____

Property Description: _____

***ATTACH SITE MAP/PLAT & BUILDING CONSTRUCTION PLANS**

 Signature of Applicant Date

 Address

 City, State, Zip

 Home Phone Cell Phone email

Publication Schedule

Rezoning Request 1st Pub Date _____
 Class II Notice 2nd Pub Date _____

Plan Commission 1st Pub Date _____
 Class II Notice 2nd Pub Date _____

Meeting Schedule

Plan Commission Meets:

Zoning Board of Appeals Meets:



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Zoning Board Appeals 1st Pub Date _____
Class II Notice 2nd Pub Date _____

DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY

Date submitted: _____ Fee paid \$ _____

Action: () Granted () Denied () Plans Requested Date Paid \$ _____

If denied, basis for denial: _____

Signature: _____ Date: _____
Brentt P. Michalek, City Administrator