

# LAND DIVISION & REZONE APPLICATION

Town of Lyndon, Sheboygan County  
 W6081 CTH N, Plymouth, WI 53073  
 p - 920-528-7255

Fee Required: \$ **300**

- Contact Permit Agent Al Steiner at 920-838-3249
- Complete all sections of this form and return to Clerk's office or Permit Agent with fee and other required documents (see section below).

NAME		PHONE	
ADDRESS		CITY	ZIP
SITE ADDRESS		CITY	ZIP
ORIGINAL PARCEL # 59010-	Currently Zoned	Acres	

### WHAT ARE YOU REQUESTING:

<b>My original parcel will become two parcels:</b>	<b>I want to split off some land and merge with another:</b>
# of Acres to split from Original Parcel: <input style="width: 100%;" type="text"/> Remaining # of acres of Original Parcel: <input style="width: 100%;" type="text"/> Would the current zoning of Orig Parcel still apply? <input style="width: 50%;" type="checkbox"/> <b>YES</b> <input style="width: 50%;" type="checkbox"/> <b>NO</b> → Orig parcel to be rezoned to: _____ # of Acres of New Parcel: <input style="width: 50%;" type="text"/> New Parcel to be zoned: <input style="width: 50%;" type="text"/>	# of Acres to split off from Original Parcel: <input style="width: 100%;" type="text"/> Remaining # of acres of Original Parcel: <input style="width: 100%;" type="text"/> Would the current zoning of Original Parcel still apply? <input style="width: 50%;" type="checkbox"/> <b>YES</b> <input style="width: 50%;" type="checkbox"/> <b>NO</b> → Original Parcel to be rezoned to: _____ Adjacent parcel land to be merged to: 59010-_____ Original size of adjacent parcel _____ acres. Original zoning of adjacent parcel: _____ With merged land, new size of adjacent parcel _____ acres. Would the current zoning of Adjacent Parcel still apply? <input style="width: 50%;" type="checkbox"/> <b>YES</b> <input style="width: 50%;" type="checkbox"/> <b>NO</b> → Adjacent Parcel to be rezoned to: _____
<b>CSM Review Application is necessary for this request! Please attach application and CSM Review fee.</b>	

Farmland Preservation Zoning (FPZ) includes A-1, A-1-RZ, A-1-S and A-PR.

How many acres will be rezoned out of FPZ?   
 How many acres will be rezoned into FPZ?

Describe the existing use of the real estate involved: \_\_\_\_\_

Describe the proposed use of the real estate involved: \_\_\_\_\_

### REQUIRED DOCUMENTS FOR THIS APPLICATION

- |  |                          |  |
|--|--------------------------|--|
| Check boxes when documents are attached. | <input type="checkbox"/> | Site map of parcel including, but not limited to, size, location of existing buildings, sanitary system and well.          |
|  | <input type="checkbox"/> | List of Owner names and mailing addresses within five hundred (500) feet of this parcel.                                   |
|  | <input type="checkbox"/> | Any additional information that may be required by Permit Agent, PC or TB to assist in the recommendation and/or decision. |

For Town Use Only			
Date App Rec'd:	PC Mtg Date:	PC recommend to TB?	Yes      No
Date notice sent to Review:		For Publication Dates of:	
Pub Hearing Date:	TB Approve?	Yes	No