

**CONDITIONAL USE APPLICATION**  
CITY OF CLINTONVILLE  
50 Tenth Street, Clintonville, WI 54929  
715-823-7600

Chapter 17 – Zoning Ordinance, City of Clintonville (17.30)

Application Fee \$100.00

Class 1 Notice-Hearing

TO: ZONING ADMINISTRATOR  
CITY OF CLINTONVILLE  
AND  
CITY PLAN COMMISSION

Applicant \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_

Address of property for conditional use if different: \_\_\_\_\_

Opposite Property Owners (with address): \_\_\_\_\_

\_\_\_\_\_

Abutting Property Owners (with address): \_\_\_\_\_

\_\_\_\_\_

Proposed Conditional Use: \_\_\_\_\_ SIC# \_\_\_\_\_

\_\_\_\_\_

Present Zoning \_\_\_\_\_

Additional Information \_\_\_\_\_

\_\_\_\_\_

Fee in the amount of \$100.00.

Receipt No. \_\_\_\_\_

Payable to: CITY OF CLINTONVILLE

Date \_\_\_\_\_ Applicant \_\_\_\_\_

Date Received \_\_\_\_\_ City Staff Signature \_\_\_\_\_

Meeting Date \_\_\_\_\_

CC: CITY PLAN COMMISSION MEMBERS