

DATE: \_\_\_\_\_

FEE: \$200 PER VARIANCE

Village of Fredonia  
242 Fredonia Avenue P.O. Box 159 Fredonia, WI 53021  
Phone (262) 692-9125 Fax (262) 692-2883  
[www.village.fredonia.wi.us](http://www.village.fredonia.wi.us)

## APPLICATION FOR VARIANCE/ZONING CODE

Owner of Property: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Variance Requested: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why Variance is Needed: \_\_\_\_\_

\_\_\_\_\_

Names and Addresses of Adjoining Property Owners:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

(use reverse side if needed)

I certify that the foregoing statements are true and correct to the best of my knowledge.

Signature of Owner of Property \_\_\_\_\_

Address of Owner, if different from above \_\_\_\_\_

Fee Paid: \$\_\_\_\_\_

**NOTICE: This application must be complete and accurate, or it will be returned.  
Survey, building plans, and/or drawings pertaining to the variance request must  
be included with this application before a hearing will be scheduled.**