

DATE: _____

FEE: \$150.00 per variance, plus
any engineering, administrative,
or special meeting costs related
to the variance(s)

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

APPLICATION FOR VARIANCE/SUBDIVISION AND PLATTING

Owner of Property: _____ Phone: _____

Address: _____

Variance Requested: _____

Unique conditions of the property that result in a particular hardship to the owner that warrants this variance: _____

(use reverse side if 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.