

# KEWAUNEE COUNTY BOARD OF ADJUSTMENT

## *Variance Appeal/Special Exception Application*

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Appeal/Application Number \_\_\_\_\_

(I) (We) \_\_\_\_\_ of \_\_\_\_\_  
Name Address

State Purpose: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do hereby appeal/apply to the Kewaunee County Board of Adjustment for:

- \_\_\_\_\_ A variance from the terms of the Kewaunee County Shoreland Zoning Ordinance
- \_\_\_\_\_ A special exception (conditional use) to the ordinance on which the Board of Adjustment is required to pass judgement
- \_\_\_\_\_ An interpretation of the ordinance (map) (text)
- \_\_\_\_\_ A decision on an alleged error, order, requirements, etc.
- \_\_\_\_\_ Other

On premises described as the \_\_\_\_\_ 1/4 of the \_\_\_\_\_ 1/4, Section \_\_\_\_\_, Town of \_\_\_\_\_  
Township \_\_\_\_\_ North, Range \_\_\_\_\_ East, Area \_\_\_\_\_ Acres \_\_\_\_\_

The undersigned hereby appeals/applies to the Kewaunee County Board of Adjustment Board for the following reasons: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*The Kewaunee County Board of Adjustment requires a plot plan to accompany all applications. Such plan or drawing must be attached to this application.*

Date Filed \_\_\_\_\_  
Appellant or Agent Signature

\_\_\_\_\_ Fee due upon filing. (Make checks payable to the Kewaunee County LWCD)