Town of Freeman

Application for Conditional Use Permit

Instructions: Please complete this application for by providing answers to the following questions.

After completion, please mail the form to: Town Clerk, Freeman Township,

Peggy Thompson 10312 Bishop Road Ferryville, 54628

e-mail: Peggy@mwt.net

608-792-4570

1	Name and Address of the Applicant:
2	Legal Description* or Address of the Property: (Picture(s) of the property is (are) useful)
3	Conditional Use Requested: (Describe the type of business or activity you plan to operate on the property.)
4	Will your business be requesting any variances for site setbacks from property lot lines and/or Township and/or County / State Roadways?
5	What type of building, if any, will the business/activity require? Existing; New:; Describe structure.

Town of Freeman

Application for Conditional Use Permit

6	Are any special permits for other jurisdictions	required in operating the business? If yes, which ones?	
7	Number of employees besides yourself:	Typical Number of Daily Customers:	
8	Name and Address of the adjourning Property	y Owners:	
Signature of Applicant: Date:		Date:	
*Note	e: Property Tax ID if available.		
	Attachements Included		