

PLAN COMMISSION REVIEW APPLICATION Village of Big Bend, WI

W230 S 9185 Nevins Street Big Bend, WI 53103

Phone: 262.662.2747 (clerk@villageofbigbend.com)

<u>Applicant</u> (Please Print or Type)	Date:
Name:	
Twine:	
Business Name:	
Address:	
Address.	
Phone:	Email:
Site Address:	Site Tax Key Number:
Type of Request (check all that apply):	
☐Concept Review (\$ 200) ☐Site Plan a	nd Operation Plan (\$ 200 AND \$.02/s.f. of lot size; \$150 for amendmen
□Conditional Use (\$ 500; \$100 for Amendme	•
☐ Rezoning/Land use Amendment (\$ 200)	•
☐CSM/ Plat (\$ 250 AND \$15 per survey lot o	r \$20 per plat lot)
Proposed Development Description (Brief):	
Acknowledgement:	
The applicant and owner acknowledges that b	y signing this document that they will be responsible for paying to
•	g, planning, legal, and administrative expenses incurred by the
_	s own engineers, attorneys, inspectors, agents, sub-contractors and
	ne shall be based upon the classification of the employee and the
rates established b the Village Board, from tim	ne to time, for each such classification. The applicant understands
that the legal and/or engineering consultants	retained by the Village are acting exclusively on the behalf of the
Village and not the applicant.	
☐ Submitting Signed Reimbursement Agreem	nent Form (REQUIRED FOR ALL SUBMITTALS)
Applicant Signature	Property Owner Signature (Required)
	and number of copies pertinent to their request. Please see the separate individual FPIan Commission approval. The appropriate submittal fee must accompany a formal
, and the state of	ceptually review their application with the Zoning Administrator before formal applications

are made. 6/28/2023