



City of Fitchburg
 Planning/Zoning Department
 5520 Lacy Road
 Fitchburg, Wi 53711 (608-270-4200)

SMARTCODE REZONING APPLICATION

The undersigned owner, or owner’s authorized agent, of property herein described hereby petitions to amend the zoning district map of the Fitchburg zoning ordinance by reclassifying from the _____ district to the _____ district the following described property:

1. Location of Property:

Street Address: _____

Legal Description - (Metes & Bounds, or Lot No. And Plat): _____

***Also submit in electronic format (MS WORD or plain text) by email to: planning@city.fitchburg.wi.us

2. Sector designation(s) (mark all that apply): O1 or O2 or G2 or G3 or G4 or G5
 a. Please also provide map showing the project boundaries with Sector designations

3. Percentage of Open Space: _____

4. SmartCode Community Designation: Infill Community (SC-IC) or New Community (SC-NC)
(For SC-IC rezoning applications within G4 & G5 Sectors, an Infill Community Regulating Plan as required under SmartCode District Article 4 shall be submitted at the time of rezoning.)

5. Proposed Community Unit Type (mark all that apply): CLD or TND or TOD

6. Provide map showing proposed Pedestrian Shed location(s)

7. Provide map showing preliminary Thoroughfare network, including Block locations & perimeters

***Also submit all mapping in either CADD or GIS files

8. Proposed Development Schedule: _____

Current Owner(s) of Property: _____

Address: _____ **Phone No.:** _____

Contact Person: _____ **E-mail:** _____

Address: _____ **Phone No.:** _____

Respectfully Submitted By: _____ **Date:** _____

Owner’s or Authorized Agent’s Signature

*(If multiple owners, application shall include statement of consent by all property owners)

PLEASE NOTE – Applicants shall be responsible for legal or outside consultant costs incurred by the City. It is the responsibility of the owner/applicant to insure compliance with all local and state requirements.

* The preceding information is considered minimum information for submission, and the City may require additional information for its review.

**Application shall be accompanied by one (1) PDF document of complete submittal, one (1) full-size set of plans, two (2) reduced sets of plans (11” x 17”), and the required CADD or GIS files for mapping. Submissions shall be made at least four (4) weeks prior to desired Plan Commission meeting. This time frame assumes a complete set of plans is provided, and if it is not provided the Plan Commission date will be adjusted.

FOR CITY USE ONLY

Date Received: _____ **Fee Paid:** _____ **Permit Request No.:** _____